



CITY OF STAUNTON, VIRGINIA
OFFICE OF
THE COMMISSIONER OF THE REVENUE
116 WEST BEVERLEY STREET P.O. BOX 4
STAUNTON, VA 24402-0004

TRANSIENT/OCCUPANCY TAX RETURN

VIRGINIA SALES TAX REGISTRATION NO. :

REPORT MONTH:

TRADE NAME:

PHYSICAL ADDRESS OF BUSINESS:

MAIL ADDRESS 1:

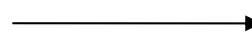
MAIL ADDRESS 2:

CITY:

STATE:

ZIP:

1. TOTAL GROSS RECEIPTS



(LINE 1)

2. LESS DEDUCTIONS

A. Exempt Rental (More than 30 Consecutive Days)

B. Refund on Rentals Included in Line 1

C. Refund on Rentals Included on Prior Reports

D. Other (Attached Explanations)

TOTAL DEDUCTIONS: (Add Line 2A Thru 2D)

(Line 2)

3. Subtract Line 2 From Line 1 (Taxable Receipts)

(Line 3)

4. TAX DUE (Multiply line 3 by 6.7%)

(Line 4)

5. Penalty For Late Filing. (10% of Tax Due, Minimum of \$2.00)

(Line 5)

6. Interest for Late Filing. (10% per year simple interest applied monthly)

(Line 6)

7. TOTAL TAX DUE (Sum of Line 4,5, & 6)

BY SIGNING THIS RETURN, I HEREBY DECLARE THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN.

SIGNATURE:

DATE:

MAKE CHECK PAYABLE TO:CITY TREASURER, STAUNTON, VA

REMIT TO:

MAGGIE RAGON
COMMISSIONER OF THE REVENUE
P.O. BOX 4
STAUNTON, VIRGINIA 24402-0004

Please make a copy for your records and return this copy with payment.