

## OFFICE OF TOWN TREASURER TOWN OF CULPEPER

400 South Main Street, Ste. 109 540-829-8240

Due on or before the  $20^{th}$  of each month following month for which report is made.

Business Name:	Federal ID No.:	
Owner Name:	Customer No.:	

## MONTHLY REMITTANCE OF ADMISSIONS TAX

1.	Gross admission charges collected for the month of, 20	\$
2.	LESS allowable deductions (must attach list)	\$
3.	Balance taxable(line 1 - line 2)	\$
4.	<b>5%</b> tax on item 3 (.05 x line 3)	\$
5.	10% interest for late payment – (line $4 \times .10 \div 365 \times number of days late)$	\$
6.	TOTAL TAX AND INTEREST	\$
	IF PAID 1 MONTH AFTER DUE DATE ADD LINES 7 & 8	
7.	10% penalty for late payment - (line 4 x.10)	\$
8.	Fee for delinquent filing - \$20.00	\$
9.	TOTAL TAX, INTEREST, PENALTY, & FEES DUE	\$

Please remit the amount shown on Line 8 to:

Treasurer, Town of Culpeper 400 South Main Street, Culpeper VA 22701

IF PAID AFTER THE DUE DATE INTEREST AT 10% PER ANNUM SHALL BE ADDED ON THE TAX DUE, A 10% PENALTY WILL BE COMPUTED AND A \$20.00 ADMINISTRATIVE FEE WILL BE DUE AND PAYABLE IN ACCORDANCE WITH SECTIONS 23-151 AND 23-154 OF THE TOWN CODE.

## **DECLARATION OF COLLECTOR:**

I hereby swear or affirm that the amounts listed above are true, correct, and complete to the best of my knowledge and belief for the period stated above.

Date	Signature		
	PRINT NAME		
Phone No	Title		
Office use only: Received by Treasurer's Office: Date:	Postmark Date:	Initial:	
Refunded/adjusted amount:	Adjusted Total Tax, Penalt	Adjusted Total Tax, Penalty and Interest:	
Clerk's Office validation: Date:	Initial:	<i>Rev. Aug 2015</i>	