

# TOWN OF DAMASCUS

Telephone: 276-475-3831

## MONTHLY REPORT OF LODGING OR MEALS TAX

(Taxes are due by the end of month following month being reported.)

FOR THE MONTH OF \_\_\_\_\_, 20\_\_\_\_\_

NAME OF BUSINESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER OF BUSINESS: \_\_\_\_\_

HOME ADDRESS OF OWNER: \* \_\_\_\_\_

TELEPHONE NUMBER OF OWNER: \* \_\_\_\_\_

EMAIL ADDRESS OF OWNER: \* \_\_\_\_\_

1. Lodging and/or Meals charges subject to Tax \$ \_\_\_\_\_

2. Tax on lodging and/or meals (7% of line 1) \$ \_\_\_\_\_

3. Subtract 4% collection fee from line 2 \$ \_\_\_\_\_  
***DO NOT*** subtract collection fee if paying after the due date.

TOTAL TAX DUE: (line 2 minus line 3) \$ \_\_\_\_\_

\* PENALTY (10% OF TAX DUE) \$ \_\_\_\_\_  
**A penalty applies if paid after the last day of the month following the month being reported on.**

\* Total due (including penalty) if paid after due date \$ \_\_\_\_\_

SIGNATURE OF BUSINESS REPRESENTATIVE:  
\_\_\_\_\_

PLEASE MAKE CHECK PAYABLE TO: **TOWN OF DAMASCUS** and mail to: **PO Box 576, Damascus, VA 24236-0576**

DATE RECEIVED BY TREASURER'S OFFICE \_\_\_\_\_

\*Home address and telephone number of owner is needed in case of an emergency at times the business is not open.  
FORM MUST BE FILED EVERY MONTH. IF NO MONIES ARE DUE, A FORM SHOULD STILL BE FILED SHOWING "ZERO" DUE.