<u> Jefferson County, West Virginia</u> --<u>Hotel Occupancy Tax Return</u>

For the Month of,	20
Name of Hotel/Motel:	
Name of Business/Owner:	
Address:	
City: State:	Zip Code:
Phone number: ()	
1. Occupancy Receipts Subject to Tax:	\$
2. Tax –[6% of line 1-above]	\$
Penalties, If due	\$
3. A. 5% of Line 2 if not paid by the 15 th of	
	\$
B. 1% of Line 2 for each additional mont	h tax remains unpaid:
	\$
4. Total Due: Lines 2; 3A and 3B	\$

I do hereby swear, under penalty of perjury, that the statements and items (both as to designation and amounts) entered in the foregoing returns and statement are to the best of my knowledge and belief true and correct.

Signature:	
Print name of signer	
Date signed:	

MAIL TO: Jefferson County Sheriff/Treasurer PO Box 9, Charles Town, WV 25414

(return this form with remittance)