

CITY OF LIBERTY

MAYOR
BRIAN C. DEESE



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TREASURER
Josie Amspacher

POLICE CHIEF
Leland "Corky" Miller

FIRE CHIEF
Mike Sargent

PUBLIC WORKS
Ray Clark

RECREATION
Tony Boiter

BUILDING OFFICIAL
Richard Davidson

CITY CLERK
V. Sue Woods

CITY COUNCIL
Michael Sheriff
Mayor Pro Tem

Rick Clark
Walt McJunkin
Dwight Yates
Brian Petersen
Josh Harrison

HOSPITALITY TAX REPORTING FORM

BUSINESS NAME AND ADDRESS

FOR FILING PERIOD: _____

DUE BY: 20th OF EACH MONTH

PENALTY: 5% INCURRED ON THE
21st OF THE MONTH

COMPUTATION OF HOSPITALITY TAX AMOUNT DUE:

1.	Gross Sales of Food/Beverage	\$ _____
2.	Hospitality Tax Rate	X _____ .02
3.	Total Tax Due	\$ _____
4.	<i>Penalty (5% of the fee due for each month outstanding)</i>	\$ _____
5.	TOTAL DUE (ADD LINES 3 & 4)	\$ _____

THIS RETURN REPORTS LOCAL HOSPITAL TAX FOR THE MONTH OF JANUARY.

I CERTIFY THAT ALL THE INFORMATION STATED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I FURTHER UNDERSTAND THAT THE CITY OF LIBERTY PROVIDES PENALTIES FOR MAKING FALSE OR FRAUDULENT STATEMENTS ON THIS REPORTING FORM.

SIGNATURE

DATE