



Department of Finance
2777 East Point Street
East Point, Georgia 30344
(404) 270-7150

AMENDED CITY OF EAST POINT HOTEL-MOTEL SALES TAX REPORT FORM FOR

_____, _____
MONTH YEAR

THIS REPORT SHALL BE DUE AND PAYABLE ON THE 20TH DAY OF THE MONTH FOLLOWING THE MONTH OF COLLECTION. IF THE 20TH FALLS ON OTHER THAN A BUSINESS DAY, THE REPORT SHALL BE DUE ON THE FOLLOWING BUSINESS DAY.

TAXPAYERS NOT FILING THIS REPORT ON OR BEFORE THE DUE DATE SHALL NOT BE ENTITLED TO THE DEALERS COMPENSATION AND ANY TAX DUE SHALL BEAR INTEREST AT THE RATE OF .54% PER MONTH OR PORTION OF MONTH UNTIL SUCH TAX IS PAID.

- 1. GROSS ROOM SALES FOR MONTH \$ _____
- 2. LESS EXEMPT SALES \$ _____
- 3. TAXABLE ROOM SALES \$ _____
- 4. 8% OF TAXABLE ROOM SALES \$ _____
- 5. *LESS DEALER RATE (3%) \$ _____
- 6. TAX DUE TO THE CITY OF EAST POINT \$ _____
- 7. AMOUNT PREVIOUSLY REPORTED \$ _____
- 8. AMOUNT OF OVER/UNDER PAYMENT \$ _____
(Line 6 minus Line 7)

BILLING ADDRESS:

PLEASE REMIT PAYMENT TO:

CITY OF EAST POINT
CASHIER'S OFFICE
2777 EAST POINT STREET
EAST POINT, GEORGIA 30344

BUSINESS NAME & ADDRESS:

SIGNATURE

() _____ - _____
PHONE NUMBER

TITLE

*APPLIES ONLY IF PAID BY THE 20TH OF EACH MONTH