



TOWN OF VIENNA
 TREASURER
 127 Center Street South
 Vienna, VA 22180
 703-255-6321

REPORT OF TAX ON MEALS & LODGING

FOR: _____
 MONTH _____
 YEAR _____

Chapter 6, Article 4, Sec. 6.32-6.47
 Chapter 6, Article 5, Sec. 6.48-6.59

Account ID _____

Name of Business: _____ Virginia Sales Tax
 Registration No.: _____
 Location: _____ Telephone: _____

1. Gross receipts of meals or lodging.....\$ _____
2. 3% of Line 1.....\$ _____
3. Less sellers discount of 3% of Line 2 (applies
 only if collections & report are filed by the due date).....\$ _____
4. Net tax payable to Town
 Line 2 minus Line 3.....\$ _____
5. 10% penalty for late payment
 (Minimum of \$10.00).....\$ _____
6. Total tax and penalty.....\$ _____
7. 10% per annum interest on tax & penalty
 (.00833 X number of months late X Line 6).....\$ _____
8. Total tax, penalty & interest.....\$ _____

Please remit the amount shown on Line 8 to: TOWN OF VIENNA
 127 CENTER STREET SOUTH
 VIENNA, VA 22180.

DECLARATION OF TAXPAYER

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.

Date: _____ Print/type name: _____

Signature: _____ Title: _____

DUE THE 20TH OF MONTH FOLLOWING MONTH FOR WHICH REPORT IS MADE