

THE MIFFLIN COUNTY HOTEL EXCISE TAX
MONTHLY REPORT

Facility County Excise Tax # _____

OFFICE USE ONLY		COUNTY	TOURISM
Date Paid		311813	248122
Check #			

Business Name _____

Address _____

Phone _____

Reporting Period _____

to _____

GROSS RECEIPTS	\$ _____
LESS EXEMPT RECEIPTS (MUST SUBMIT EXEMPT FORM)	\$ _____
TAXABLE RECEIPTS	\$ _____
AMOUNT TAX COLLECTED AT 5% (.05)	\$ _____
TAX DUE	\$ _____
PLUS LATE PAYMENT FEE AT .75% (.0075) PER MONTH	\$ _____
LESS PERMANENT RESIDENTS CREDIT	\$ _____
TOTAL PAYMENT DUE	\$ _____

1. NUMBER OF ROOMS _____ X _____ (DAYS IN PERIOD) = _____

2. TOTAL NUMBER OF ROOMS OCCUPIED FOR PERIOD _____

This tax is to be collected by the operator of each facility from each patron who rents a room. Each operator is required to file a tax return and remit tax due on or before the 25th day of the month subsequent to the month in which the tax is levied. If there is not tax due for a given period, file return indicating "No Tax Due" on the tax due line.

I hereby certify that this return has been examined by me and that the information herein is true, correct and complete to the best of my knowledge.

NAME (please print): _____ DATE: _____

SIGNATURE: _____ TITLE: _____

This form must accompany your monthly tax return:
SUBMIT BY THE 25TH OF EACH MONTH FOR THE PRIOR MONTH.

Make check payable to: MIFFLIN COUNTY TREASURER

MAIL TO: DIANE L. GRIFFITH TREASURER
20 NORTH WAYNE STREET
LEWISTOWN, PENNSYLVANIA 17044
PHONE (717) 248-8439 FAX (717) 242-5450

#1 - County Copy

#2 - Hotel's Copy

EXHIBIT D