



Resort Tax Transmittal Form

Reporting for the Month(s) of _____ Quarter _____

Business Name _____

Circle One Category: Retail Bar/Restaurant Liquor/ Convenience/Grocery/Dispensery Short Term Rental Hotel/Motel Service/ Equipment Rentals

Mailing Address _____

Business Contact _____ Phone No. _____

(A) Gross Taxable Sales Amount

Month 1: [] Month 2: [] Month 3: [] TOTAL = Line A \$ -

(B) 3% Tax (Line A x .03) _____ Line B \$ -

(C) 1% Infrastructure Tax (Line A x .01) _____ Line C \$ -

(D) Delinquent Fee (Line B + Line C x # of days late x 0.000493) [0] days past due Line D \$ -

(E) Penalty Fee (\$250 > 30 days past due | \$750 > 60 days past the due) _____ Line E \$ -

(F) Net Taxes Due (Line B + Line C + Line D + Line E) _____ \$ -

*NSF checks shall be charged a \$50 returned item fee

SIGNED

DATE

PLEASE MAKE CHECK PAYABLE TO: THE CITY OF RED LODGE. SEND PAYMENTS AND THIS FORM TO: PO BOX 9, RED LODGE, MT 59068