

TOWN OF DAYTON
ROOM TAX REPORTING FORM

NAME: _____

ADDRESS: _____

MONTH _____ YEAR _____

Hotel/Motel Room Tax is DUE the last day of the month following the month being reported. Unpaid taxes bear interest at 18% per annum from due date until the 1st day of month following the month the payment is received, PLUS a \$10.00 late fee will be assessed AND a negligence penalty equal to 5% of the Tax due for each month or part month the return is filed after the due date. The maximum negligence penalty for late filing is 25% of the tax due

(1) If all income is from non-transient guest, check box sign and return with this form.

(2) Gross Receipts \$ _____

(3) Deductions – Non transient room receipts - _____

(4) Taxable Room Rent _____

(5) Town of Dayton Tax at 8% **X** .08

(7) Tax due Town of Dayton \$ _____

I hereby certify that the information supplied hereon is accurate to the best of my knowledge and belief.

Signature of Owner or
Authorized Agent: _____

Title: _____

Firm: _____

Date: _____

Please remit to: Town of Dayton
 E629 East Rd
 Waupaca, WI 54981