_____

Name of Entity

HOTEL /MOTEL TAX
QUARTERLY REPORT FOR QUARTER ENDING _____
TO THE CITY OF BURNET

City Ordinance #86-4, Amended by Ordinance #93-19
(Attach Evidence Supporting Exemption)

Total Gross Receipts $ _____

Total Exempt Receipts $ _____

Total Taxable Receipts $ _____

Tax Due @ 7% $ _____(On or Before Due Date) _____

Penalty Due @ 5% $ _____ (After Due Date) _____

Interest Due @ 6% $ _____ (60 Days After Due Date) _____

Total Paid to City $ _____

Net Amount Paid to State of Texas for this period $ _____

I declare under penalties prescribed in the above cited ordinances, as may be amended, that the information contained in this document is true and correct to the best of my knowledge and belief.

Signed by _____ for: (_____)
Name of Entity

Date _____

Please make check payable to the City of Burnet (if paying in person), 1001 Buchanan Dr. Suite 4, Burnet, Texas 78611 (by mail) P. O. Box 1369, Burnet, Texas 78611.

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YOUR COPY (Please detach before mailing)

REPORT OF HOTEL-MOTEL TAX REPORT FOR QUARTER ENDED _____

Total Gross Receipts $ _____
Total Exempt Receipts $ _____
Total Taxable Receipts $ _____
Tax @7% $ _____