

CHARLES CITY COUNTY



LODGING TAX PAYMENT COUPON

Report Month Ending: (MM/YY)			
Business Name:		Gross Receipts:	\$
Trade Name:		Lodging Tax Gross x .02:	\$
Mailing Address:		Penalty after 20 th \$10 or 10% (whichever is greater):	\$
City, State Zip:		TAX AMT DUE:	\$
Owner/Applicant Signature:		DATE:	
Email Address:			

Make checks payable to: Charles City County Treasurer, P.O. Box 38, Charles City, VA 23030. Include this coupon with your payment. Payments are due by the 20th of each month. For questions contact Commissioner of the Revenue's office at 804-652-2161.

OFFICE USE ONLY:

Date Rec'd: _____ Late: Y or N Cash: _____ Check #: _____ Credit: _____
 Staff Initials: _____

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