

CITY OF CAMERON
HOTEL/MOTEL OCCUPANCY TAX REPORT

a. Taxpayer Name:

- A REPORT MUST BE FILED EVEN IF NO TAX IS DUE
- DO NOT WRITE IN SHADED AREAS

b. Name and Mailing Address:

c. Filing Period:

d. Due Date:

1. OUTLET TRADE NAME AND LOCATION ADDRESS	2. TOTAL ROOM RECEIPTS	3. TOTAL TAXABLE RECEIPTS

4. Total room receipts for ALL locations (Item 2 from this page)	4. _____
5. Total taxable receipts for ALL locations (Item 3 from this page)	5. _____
6. Total tax due (7% of Item 5)	6. _____
7. Discount (If paid by 20th day, enter 1% of Item 6)	7. _____
8. Tax due after discount (Item 6 minus Item 7)	8. _____
9. Penalty (See Instructions)	9. _____
10. TOTAL AMOUNT DUE AND PAYABLE (Item 8 and Item 9)	10. _____

FOR OFFICE USE ONLY

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief.

Duly authorized agent

Amount Received: _____

Check Number: _____

Received By: _____

Date Received: _____

SIGN

HERE

Date

Daytime phone: _____

Make the amount in Item 10 payable to: **THE CITY OF CAMERON**

Mail to: **City of Cameron**

P. O. Box 833

100 S Houston Avenue

Cameron, Texas 76520

For assistance call **254-697-6646**