

Due by

Town of Round Lake Quarterly Room Tax Return

____ Quarter Return

Quarter Ending:

Name: _____

Address: _____

Phone Number: _____

Name of Business if Different from Above: _____

If filing & paying on time complete Section A only

Do not include tax-exempt sales

SECTION A

Net Sales subject to room tax: A: _____

Room Tax Collected (A x .04) B: _____

Less 5% net tax retained by licensed provider (B x .05) C: _____

Net Room Tax Due Town of Round Lake: (B - C) D: _____

If filing & paying late but within 30 days of due date-please complete Section A & B

SECTION B

Amount due from line D above: E: _____

Late Penalty F: _____ \$25.00

Amount Due to Town (E+F) G: _____

(complete section A & B if filing & paying within 30 days of due date)

If filing and payment is not made within 30 days of due date interest will be assessed at a rate of 12% per annum or 1% per month of net room tax for each month in arrears per ordinance # . Please complete Section A & C

SECTION C

Amount due from line D above: H: _____

Interest: (H x .01 x # of months past due) I: _____

Late Penalty J: _____ \$25.00

Amount due to Town of Round Lake: (H + I + J) K: _____

Deliver to: Town of Round Lake, 10625 N County Hwy A, Hayward, WI 54843

Authorized Signature

Date