

CAROLINE COUNTY
COMMISSIONER OF THE REVENUE
 212 N Main Street
 P.O. Box 819
 Bowling Green, VA 22427
 Phone#: (804) 633-1050
 Fax#: (804) 633-3480
 E-mail: consumertax@co.caroline.va.us

MONTHLY REMITTANCE OF FOOD AND BEVERAGE TAX

Business Name: _____

- 1. Gross Receipts for the Month of _____ 20____ \$ _____
- 2. Less allowable deductions (must attach list) \$ _____
- 3. Balance taxable (Line 1 minus Line 2)..... \$ _____
- 4. 4% TAX (Line 3 x .04) \$ _____
- 5. LESS 3% Sellers discount (Line 4 x .03)..... \$ _____
 (ONLY WHEN FILED BY THE 20TH DAY OF THE FOLLOWING MONTH)
- 6. Balance Due (Line 4 minus Line 5)..... \$ _____
- 7. PENALTY for LATE payment made after the 20th of the month (Line 4 x .10)..... \$ _____
 -or-
 PENALTY for LATE payment MORE THAN 30 DAYS past due (Line 4 x .20)..... \$ _____
 (A MINIMUM LATE PAYMENT PENALTY OF \$2.00 IS REQUIRED ON ALL LATE PAYMENTS)
- 8. Total Tax, Penalty, and Interest (Due by the 20th of the following Month)..... \$ _____

MAKE CHECK PAYABLE TO: TREASURER, CAROLINE COUNTY
PLEASE MAIL PAYMENT TO: P.O. BOX 819 BOWLING GREEN, VA 22427

INSTRUCTIONS: MAIL ORIGINAL TO THE COMMISSIONER OF THE REVENUE BY THE 20TH DAY OF THE FOLLOWING MONTH OR LATE PENALTIES WILL APPLY.

DECLARATION OF SELLER:
 I hereby swear or affirm that the amounts listed above are true, correct, and complete to the best of my knowledge and belief for the period stated above.

SIGNATURE: _____ **DATE:** _____ **PHONE#:** _____

FOR OFFICE USE ONLY

Date Received in Office **Check #** **Check Amount** **Received By**