

Town of Doty

(BnB) - HOTEL-MOTEL ROOM TAX REPORT

For the period of _____

(Month & Year)

Name of BnB: _____

DOTY - Address: _____

- 1) If all income is from non-transient guests, check box ☐
sign and return this form.
- 2) Gross Receipts \$ _____
- 3) Deductions (Itemize on reverse side of this form) \$ _____
- 4) Taxable Room Rent \$ _____
- 5) Multiply line 4 by room tax rate of 5%

x. 05
- 6) Tax Due (payable to Treasurer, Town of Doty) \$ _____
- 7) Attach a copy of your Wisconsin Sales Tax Report.

Name of Preparer _____ (please print)

Title _____ Name of Firm _____

Telephone # _____ Email: _____

Mailing Address _____

Signature of Preparer _____ Date _____

INSTRUCTIONS

If all income is from non-transient guests (those staying over 30 days) check box, sign and return this form.

Report gross receipts received from the furnishing at retail rooms or lodging to transients, for the beginning to the end of the previous month.

This report shall be filed each month at the same time you are required to file your state sales tax report, if such state report is required to be filed monthly. If not so required, this report shall be filed on the 20th day of each month.

Payment of the amount of tax hereby imposed shall be paid to the Town Treasurer at the same time this report is filed.

All unpaid taxes shall bear interest at the rate of one and one-half percent (1-1/2%) per month from the due date of the return. Failure to pay the tax, or delinquent payment of such taxes, shall be subject to a One Hundred Dollar (\$100.00) late filing penalty in addition to the interest imposed herein.

If a false or fraudulent return is filed with the intent in either case to defeat or evade the tax imposed by this Section, a penalty of fifty percent (50%) of the tax due shall be paid in addition to the tax, interest and late filing penalty.

DEDUCTIONS

a.	Sales Tax	\$ _____
b.	Restaurant Receipts	\$ _____
c.	Guest Laundry	\$ _____
d.	Guest Phone	\$ _____
e.	Banquet Sales	\$ _____
f.	Vending Commission	\$ _____
g.	Sundry Sales	\$ _____
h.	Miscellaneous Receipts	\$ _____
i.	Newspaper	\$ _____
j.	_____	\$ _____
k.	TOTAL (transfer to line 3 of report)	\$ _____