

Town of Strongs Prairie
Room Tax

Reporting Period: _____ Year: _____

THIS RETURN MUST BE FILED EVEN IF NO TAX IS DUE

Name & Rental Property Address

The following payment is due along with this form to the Town of Strongs Prairie no later than the last day of the next month succeeding the end of the quarterly period covered by the return.

Check here if you use a Marketplace Facilitator (example; AirBnb, Vrbo, or Vacasa) and they will be sending in your room tax. Please include a copy of any documents or statements to support the report from the facilitator for quarterly reporting.

Which facilitator do you use? _____

Gross Room Sales _____

Tax Due 5.5% _____

Make check payable and mail back to:
Town of Strongs Prairie
P.O. Box 69
Arkdale, WI 54613

I hereby certify the information-supplied hereon is accurate to the best of my knowledge and belief.

Authorized Signature

Date

Title

Email

This form, process, and entity to which it applies are subject to review by officials of the Town of Strongs Prairie or their agents.

Town Treasurer's Use Only

Amount Received: \$ _____

Date Received: _____