

CITY OF MAUSTON

Room Tax Annual Tax Return

(Due: March 15)

Return this form and check to:

Name of Establishment: _____

City of Mauston
Attn: Daron Haugh
303 Mansion Street
Mauston, WI. 53948

This Return is for: _____ Year

| | | Amount Submitted on Quarterly Tax Return | Adjusted Amount * (For each adjustment, provide explanation on separate sheet) |
|-----------|---|---|--|
| 1. | Gross Receipts: (Line 1 of quarterly Return) | | |
| | 1 st Quarter | \$ | \$ |
| | 2 nd Quarter | \$ | \$ |
| | 3 rd Quarter | \$ | \$ |
| | 4 th Quarter | \$ | \$ |
| 2. | Deductions: (Lines 2(a) & (b) of quarterly return) | | |
| | 1 st Quarter | \$ | \$ |
| | 2 nd Quarter | \$ | \$ |
| | 3 rd Quarter | \$ | \$ |
| | 4 th Quarter | \$ | \$ |
| 3. | Subtotals: (Line 3 of quarterly return) | | |
| | 1 st Quarter | \$ | \$ |
| | 2 nd Quarter | \$ | \$ |
| | 3 rd Quarter | \$ | \$ |
| | 4 th Quarter | \$ | \$ |
| 4. | Tax Due: (Line 5 of quarterly return, which is 5% of Line 3) | | |
| | 1 st Quarter | \$ | \$ |
| | 2 nd Quarter | \$ | \$ |
| | 3 rd Quarter | \$ | \$ |
| | 4 th Quarter | \$ | \$ |
| 5. | Totals: | (a) \$ | (b) \$ |
| 6. | If Line 5(a) is more than 5(b), Subtract 5(b) from 5(a). This is the amount you overpaid: (This will be refunded to you by City) | | \$ |
| 7. | If Line 5(b) is more than 5(a), Subtract 5(b) from 5(a). This is the amount you owe: (Please send a check to City) | | \$ |

I, hereby certify that the foregoing information is true and correct to the best of my knowledge, information and belief.

Signature: _____ Date: _____
Business Owner / Agent
Print Name

* Attach explanation sheet for each adjustment