



CITY OF FAIRBORN
FINANCE DEPARTMENT

RETURN FOR THE PAYMENT OF TRANSIENT OCCUPANCY TAX

REGISTRATION NO. _____

MONTHLY PERIOD FROM _____ 20____ TO 20_____

NAME _____

ADDRESS _____

1. GROSS RECEIPTS-	All Hotel & Motel Lodging furnished to Guests	\$ _____
2. EXEMPT RECEIPTS-	Permanent Guests (Anyone with continuous lodging over 30 days)	\$ _____
3. OTHER EXEMPTIONS-	(Attach copy of Exemptions Certificate)	\$ _____
4. TOTAL EXEMPT RECEIPTS-	(Add lines 2 & 3)	\$ _____
5. NET TAXABLE RECEIPTS-	(Line 1 less Line 4)	\$ _____
6. TAX DUE	(Enter 3% of Line 5)	_____
7. CREDIT or DEBIT-	(Over or Underpayment in prior Month)	\$ _____
8. PENALTY-	(10% per month for late return)	\$ _____
9. INTEREST-	(1/2 % per month until paid)	\$ _____
10. TOTAL TAX DUE-	(sum of Lines 6,7,8, &9)	\$ _____

I hereby certify that the information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signed: _____
Title: _____

Deliver or mail original to the office of the Finance Director of the City of Fairborn, Ohio. 44 West Hebble Avenue, Fairborn, Ohio 45324

Make Check, draft, or money order payable to the City of Fairborn.

To avoid penalty and interest, payments must be received on or before the last day of the month following the close of each calendar month.