



FINANCE DEPARTMENT
901 Wellington Avenue
Elk Grove Village, IL 60007

HOTEL/MOTEL OCCUPANCY TAX RETURN

For the month ending

Statement of Tax Receipts under the Provision of Ordinance No. 1435 of the Municipal Code of Elk Grove Village.

Hotel/Motel Name:

COMPUTATION OF TAX:

- | | | |
|----|------------------------------------|----------|
| 1. | Gross room rental receipts | \$ _____ |
| 2. | Gross Tax (6% of line 1) | \$ _____ |
| 3. | Less Collection Fee (2% of line 2) | \$ _____ |
| 4. | Net tax to be remitted | \$ _____ |

Taxes must be paid on or before the 15th day of the month immediately following the month for which the return is being filed. Make checks payable to: ELK GROVE VILLAGE.

I hereby affirm that the statement herein contained are taken from the books and records of the above listed establishment and are true and correct to the best of my knowledge.

Dated this _____ of _____, 20____.

Signature

Printed Name

Title

Phone

Return one copy with your remittance to Accounts Receivable, Village of Elk Grove, 901 Wellington Avenue, Elk Grove Village, IL 60007.