## CALCASIEU PARISH SALES & USE TAX DEPT.

PO Drawer 2050 Lake Charles, LA 70602-2050 337-217-4280 FAX 337-217-4281

## HOTEL - MOTEL TAX REPORT

 $\label{eq:make-all-remittances} \ \ \text{make all remittances payable to:}$ 

Calcasieu Parish School Board SALES TAX DEPT. PO Drawer 2050 Lake Charles, LA 70602-2050

ACCOUNT NO.:

MONTH YEAR

|  | A<br>Calcasieu Parish<br>5% | B<br>Hope EDD<br>7%  | C<br>Opelram EDD<br>7% | D<br>Executive EDD<br>7% | E<br>MorganField EDD<br>6% |  |
|--|-----------------------------|--|------------------------|--------------------------|----------------------------|--|
| 1. Gross Rentals   | 1                           |  |                        |                          |                            |  |
| ALLOWABLE DEDUCTIONS   |                             |  |                        |                          |                            |  |
| A. Government Employees (Exemption Certificate Required)   |                             |  |                        |                          |                            |  |
| B. Other Deductions Authorized by Law (Explain Briefly)  |                             |  |                        |                          |                            |  |
|  |                             |  |                        |                          |                            |  |
|  |                             |  |                        |                          |                            |  |
| 2. Total Allowable Deductions (Line A thru Line B)   | 2                           |  |                        |                          |                            |  |
| 3. Amount Taxable (Line 1 minus Line 2)  | 3                           |  |                        |                          |                            |  |
| TAX COMPUTATION  |                             |  |                        |                          |                            |  |
| 4. Tax Due (Multiply Line 3 by % in column)  | 4                           |  |                        |                          |                            |  |
| 5. Comp Rooms Taxable Amount - For Riverboats & Racetracks Only - Schedule B Line C  | 5                           |  |                        |                          |                            |  |
| 5a. Comp Rooms Tax Due (Mulitiply Line 5 by 4%)  |                             |  |                        |                          |                            |  |
| 6. Excess Tax Collected  | 6                           |  |                        |                          |                            |  |
| 7. Total Amount of Tax Due (Line 4 plus Line 5a plus Line 6)   | 7                           |  |                        |                          |                            |  |
| 8. Less Vendor's Comp. (1% of Line 7 if Paid by the 20th of the Month Due)   | 8                           |  |                        |                          |                            |  |
| 9. Net Amount Tax Due (Line 7 minus Line 8 if Not Delinquent)  | 9                           |  |                        |                          |                            |  |
| 10. Penalty - 5% of Tax for Each 30 Days or Fraction Thereof Not to Exceed 25% Aggregate   | 0                           |  |                        |                          |                            |  |
| 11. Interest - 1 1/4% of Tax Due Each 30 Days or Fraction Thereof From Date Due Until Paid.  | 1                           |  |                        |                          |                            |  |
| 12. Total Amount Due (Add Lines 9 thru 11)   | 2                           |  |                        |                          |                            |  |
| 13. Authorized Debit/Credit Memocopy attached  | 3                           |  |                        |                          |                            |  |
| 14. Total Amount Due (Line 12 plus or minus Line 13)   | 4                           |  |                        |                          |                            |  |
| Total A+B+C+D+E<br>Line 14   | <b>)</b>                    | Total Remittance   |                        |                          |                            |  |
| This return is due on the 1st day of the month following the period covered by this return and becomes delinquent if not transmitted on or before the 20th day.  | WA                          | WARNING: DO NOT Include with Sales Tax Check. Please issue separate payment. |                        |                          |                            |  |
| I declare, under the penalties for filing false reports that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has any knowledge. |                             |  |                        |                          |                            |  |
| AUTHORIZED SIGNATURE DATE  | _                           | REVIEWED BY  |                        |                          |                            |  |