



**Hotel / Motel Tax
Return**

Town of Ansted
PO Box 798
Ansted, WV 25812
304-658-5901 – FAX 304-658-4680
www.townofansted.com

Tax Period: _____, 20_____

GENERAL INFORMATION:

Name of Rental: _____ Location of Rental: _____

Owner's Name: _____ Mailing Address: _____

Site Manager: _____

COMPUTATION OF REVENUES:

- 1. Gross Revenue for Tax Period..... \$ _____
- 2. Amounts from credit sales not reported in last tax period \$ _____
- 3. Total Gross Revenue (line 1 plus line 2) \$ _____

ADJUSTMENTS TO GROSS ROOM REVENUE:

- 4. Amount paid by persons occupying rooms for 30 days or more..... \$ _____
- 5. Amounts billed to and paid by Federal Government \$ _____
- 6. Amounts billed to and paid by State of West Virginia \$ _____
- 7. Total Adjustments (total of line 4,5,6)..... \$ _____
- 8. Total Taxable Room Revenues (line 3 minus line 7)..... \$ _____

COMPUTATION OF AMOUNT OF TAX:

- 9. Total Taxable Revenue (enter amount shown on line 8) \$ _____
- 10. Multiply amount on line 9 by 0.06 \$ _____
- 11. Amount remitted via online booking services \$ _____
- 12. **Total Tax Due** (line 10 minus line 11) \$ _____

The undersigned certifies that the above amounts are true and correct and acknowledges that the statements are made under penalty of law.

Authorized Signature: _____ Title: _____

Date: _____