

Mountain Home Advertising and Promotion Commission

Gross Receipts Tax Monthly Report

Sales Tax Permit Number _____

Business Name _____

Owner's Name _____

Address _____

For the month of _____ Year _____

(Each month must be reported separately. Report must be filed even if no tax due.)

Taxable Gross Receipts \$ _____

Tax (2% Hotel/Motel) \$ _____

Less 2% of tax (if paid by 20th of month) \$ _____

Total \$ _____

Penalty (5% after 30 days due per month) \$ _____

Total Tax Due \$ _____

Make Check payable to and mail with payment to:

Mountain Home Advertising & Promotion Commission
PO BOX 377
Mountain Home, Arkansas 72654

I hereby state, avow and affirm that the statements here are full, true and correct as required by provisions of Ark. Code Ann. 26-75-601 and City Ordinance No. 2013-14, such regulations promulgated thereunder by the Mountain Home Advertising & Promotion Commission.

Date Prepared

Signature