



CITY OF RED LODGE

1 PLATT AVENUE SOUTH, P.O. BOX 9, RED LODGE, MONTANA 59068

Resort Tax Transmittal Form

Reporting for the Month(s) of _____ Quarter _____

Business Name _____

Mailing Address _____

Business Contact _____ Phone No. _____

(A) Gross Taxable Sales Amount Line A _____

(B) 3% Tax (Line A x .03) Line B _____

(C) 1% Infrastructure Tax (Line A x .01) Line C _____

(D) Delinquent Fee (Total of Line B + Line C x # of days late x 0.000493) Line D _____

(E) Net Taxes Due (Line B + Line C + Line D) _____

* Delinquent payments must be made with a cashier's check.

SIGNED

DATE

PLEASE MAKE CHECK PAYABLE TO: THE CITY OF RED LODGE. SEND PAYMENTS AND THIS FORM TO PO BOX 9 RED LODGE, MT 59068

KEEP YELLOW COPY FOR YOUR RECORDS