

CITY OF ALTON
FOOD AND BEVERAGE TAX RETURN

Business Name _____
Address _____
City, State, Zip _____
Phone _____

Dear Business Owner:

The Food and Beverage Tax for the period of _____ is now due.
(month/quarter/year)

Please return your remittance with this letter no later than _____. Include penalty and interest, if appropriate. (end of the following month)

Please submit a copy of your Illinois ST-1 form (which is a copy of the tax form you send to the IL Dept. of Revenue each month). Any business with multiple locations must submit a copy of ST-2 form.

- 1. ADJUSTED TAXABLE RECEIPTS _____
- 2. 1/2% of line #1 _____
- 3. Penalty 10% of line 2 _____
- 4. Interest (1.25% per month of line 2) _____
- 5. Ord. 6705/Addl Delinquent Penalty (\$50 per mo) _____
- 6. Tax penalties or interest from previous month _____
- 7. Add line 2, 3, 4, 5, and 6 _____
- 8. Credits _____
- 9. TOTAL TAX PAYABLE (line 7 less line 8) _____

RETURN THIS FORM WITH YOUR REMITTANCE TO: CITY TREASURER
101 E Third, Suite 102
Alton, IL. 62002

Make checks payable to: City of Alton "Food and Beverage Tax"
Under penalty as provided by law, I declare that I have examined this return and to the best of my knowledge believe it is true and correct. If business has closed please fill in the following blank:

LAST TAX RETURN - BUSINESS WAS DISCONTINUED ON: _____
IF NO BUSINESS WAS CONDUCTED DURING ABOVE PERIOD CHECK HERE: _____

Signature: _____ Date: _____