



Town of Great Falls

2% Local Hospitality Tax Reporting Form

NAME OF BUSINESS: _____

Gross Receipts for the month of _____ 2023

1. Total of all revenue received for all foods and beverages prepared for immediate consumption: \$ _____

2. Multiply this amount by 2%: 2% x _____

3. Total amount to be remitted to Town of Great Falls: \$ _____

4. Late Penalty: \$ _____
(Delinquent payment: include 5% of amount to be remitted if payment is made after the 20th of the month.)

TOTAL DUE (Sum of lines 3 and 4): \$ _____

The 2% Local Hospitality Tax is to be remitted to the Town of Great Falls on a monthly basis, along with the Reporting Form, *due on or before* the 20th day of the month and should cover the tax due for the previous month.

Mail Remittance and Reporting Form to:

Town of Great Falls
P.O. Box 177
Great Falls, S.C. 29055