

COUNTY OF MADISON - PREPARED FOOD AND BEVERAGE TAX RETURN

DUE THE 20TH DAY OF EACH MONTH FOR TAX COLLECTED THE PREVIOUS MONTH.

NAME _____

ADDRESS _____

PHONE # _____

MONTH REPORTING _____

Return First & Second Copies to:

TREASURER
P.O. Box 309
Madison, VA 22727

MAKE CHECK PAYABLE TO:

COUNTY OF MADISON

☐ Final Return

1. Gross Sales of Prepared Food & Beverage \$ _____

2. Exempt Sales \$ _____

3. Taxable Sales (Line 1 minus Line 2) \$ _____

4. Tax Due (4% of Line 3) \$ _____

5. Adjustments from Previous Month \$ _____

6. Net Tax Due \$ _____

7. Penalties (Late Filing) \$ _____
(10% per month or \$10 minimum - 30% maximum)

8. Total Due \$ _____

Signature _____

Date _____

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YELLOW/COMMISSIONER

PINK/BUSINESS