

**Town of Ansted, West Virginia**  
**HOTEL/MOTEL TAX RETURN**

Tax Period: \_\_\_\_\_, 20\_\_\_\_

**GENERAL INFORMATION:**

Name of Hotel/Motel:

Address:

Manager:

Number of Rooms:

**COMPUTATION OF REVENUES:**

- 1. Gross Room Revenue for Tax Period... .. \$ \_\_\_\_\_
- 2. Amounts from credit sales not reported in last tax period .....\$ \_\_\_\_\_
- 3. Total Gross Room Revenue (line 1 plus line 2) .....\$ \_\_\_\_\_

**ADJUSTMENTS TO GROSS ROOM REVENUE:**

- 4. Amount paid by persons occupying rooms for 30 days or more.... .. \$ \_\_\_\_\_
- 5. Amounts billed to and paid by Federal Government..... \$ \_\_\_\_\_
- 6. Amounts billed to and paid by State of West Virginia ..... \$ \_\_\_\_\_
- 7. Total Adjustments (total of line 4,5,6) .....\$ \_\_\_\_\_
- 8. Total Taxable Room Revenues (line 3 minus line 7) .....\$ \_\_\_\_\_

**COMPUTATION OF AMOUNT OF TAX:**

- 9. Total Taxable Room Revenue (enter amount shown on line 8) .....\$ \_\_\_\_\_
- 10. Multiply amount on line 9 by .06 .....\$ \_\_\_\_\_
- 11. Total Tax Due .....\$ \_\_\_\_\_

The undersigned certifies that the above amounts are true and correct and acknowledges that the statements are made under penalty of law.

Authorized Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_