

TAXPAYER INFORMATION

Vendor Name _____
 Trade Name _____
 Address _____
 City, State, Zip _____

EVENT INFORMATION

Name of Event _____
 Date(s) of Event: _____
 Event Ending Date: _____
 City License # _____

COMPUTATION OF TAX

Due Date: 20th of the Month Following the Event

- | | | |
|---|----|----------------------|
| 1. GROSS SALES _____ | \$ | <input type="text"/> |
| 2. LESS: DEDUCTIONS _____ | \$ | <input type="text"/> |
| 3. TOTAL TAXABLE SALES _____ | \$ | <input type="text"/> |
| 4. AMOUNT OF CITY SALES TAX DUE (3% of Line 3) _____ | \$ | <input type="text"/> |
| 5. VENDOR'S FEE (2.5% of Line 4) _____ | \$ | <input type="text"/> |
| 6. TOTAL SALES TAX DUE (Line 4 minus Line 5) _____ | \$ | <input type="text"/> |
| 7. PENALTY DUE (10% of Line 4) _____ | \$ | <input type="text"/> |
| 8. INTEREST DUE (1% of Line 4 for every month past due) _____ | \$ | <input type="text"/> |
| 9. TOTAL TAX, PENALTY AND INTEREST DUE (Add Lines 6, 7 & 8) _____ | \$ | <input type="text"/> |

Signature of Applicant: _____

Date: _____

Printed Name: _____

Phone: _____

I declare, under penalty of perjury in the second degree, that this return has been examined by me, that the statements made herein are made in good faith pursuant to Colorado tax laws and regulations and to the best of my knowledge and belief are true, correct and complete.

GENERAL INFORMATION

- Do Not** include taxes collected on behalf of the State of Colorado
- Subtract the vendor's fee only if you file this return on or before the due date
- Make check payable to: **City of Littleton**
- Remit To:** City of Littleton, Department of Finance, 2255 West Berry Ave., Littleton, CO 80165
- If you have questions or need assistance, please call (303)795-3768