



**(TAXES AND FEES DIVISION)**  
**AMUSEMENT TAX EVALUATION, ASSESSMENT & MONITORING UNIT**

Amusement Tax Return for the Month of \_\_\_\_\_  
(For amusement places that do not issue admission tickets)

Taxpayer: \_\_\_\_\_  
Establishment/Event: \_\_\_\_\_  
Address: \_\_\_\_\_

Day	No. Of Patrons	Admission Fee	Gross Receipts	Tax Rate	Tax Due
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
		<b>Total</b>			

I hereby certify, on the pain of perjury, that the foregoing information relative to the gross taxable receipts due from the above-named place of amusement are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
(Signature over Printed Name)  
(Proprietor, Owner Lessee or Operator)

Subscribed and Sworn to before me, on \_\_\_\_\_, affiant having exhibited Community Tax Certificate No. \_\_\_\_\_ issued at \_\_\_\_\_, on \_\_\_\_\_.

Notary Public

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