



Republic of the Philippines
Quezon City
Office of the City Treasurer



(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					
		Total			

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

Doc. No.
Page No.
Book No.
Series of 20_____.

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