



CITY OF JASPER - 200 Burnt Mountain Road - Jasper, GA 30143 Phone: 706-692-9100

ALCOHOLIC BEVERAGE EXCISE TAX RETURN

3% Sales Excise Tax on Alcoholic Beverages for the Monthly Period of _____, 20__

IMPORTANT

This return must be **filed** and **paid** by the 20th of the month following the period for which the tax is due to avoid loss of licensee's compensation and payment of the penalty and interest. Dealer must file a timely return even though no tax is due. Do not send cash by mail.

Date of Tax Return: _____

Name of Licensee: _____

Trade Name: _____

Street Name: _____

City, State, and Zip Code: _____

THIS RETURN IS SUBJECT TO AUDIT

1.) **Gross Food Sales:**

2.) **Gross Liquor Sales:**

3.) **Excise Tax Due: X 3% of sales**

Liquor:	\$ <input type="text"/>
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4.) **Licensee's Compensation:**

-3%

(Deductible only timely returns 3% tax)

sub total:	<input type="text"/>	Total: \$ <input type="text"/>
		for line 7

5.) **Penalty:** _____
5% every 120 days

6.) **Interest:** _____
.604% per month (Interest calculated as prime + (plus) 3% divided by 12. This rate will change every January).

7.) **PAY THIS AMOUNT:** \$ **Check #** _____
(Make checks payable to City of Jasper)

I certify that this return, including accompanying schedules or statements, has been examined by me and is, to the best of my knowledge and belief, a true and complete return, made in good faith, for the period stated. **DO NOT SEND COPY. SEND ORIGINAL COLOR CODED FORM.**

This _____ day of _____, 20__

Licensee's Signature

Return Prepared by: _____

Phone # _____