

# TOWN OF SOUTH BOSTON, VIRGINIA

Director of Finance  
455 Ferry Street  
South Boston, Virginia 24592

\_\_\_\_\_  
VIRGINIA SALES TAX REGISTRATION NO.

\_\_\_\_\_  
MONTH ENDED

CHECK WHETHER APPLICANT IS:

- INDIVIDUAL
- PARTNERSHIP
- CORPORATION

Name \_\_\_\_\_

\_\_\_\_\_  
TRADE NAME

\_\_\_\_\_  
P.O. BOX OR MAILING ADDRESS

\_\_\_\_\_  
DEFINITE LOCATION OF BUSINESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

## MEALS TAX

1. GROSS RECEIPTS (month)		\$ _____
2. ALLOWABLE DEDUCTIONS:		
A. Meals to employees when no charge is made to employee	\$ _____	\$ _____
B. Meals furnished by hospitals or nursing homes to patients but not to employees	\$ _____	
C. Other (describe) _____	\$ _____	
D. TOTAL DEDUCTIONS		\$ _____
3. TAXABLE RECEIPTS (Subtract Item 2D from Item 1)		\$ _____
4. TAX - 6% (Multiply Item 3 by .06)		\$ _____
5. SELLER'S DISCOUNT - 3% : Allowable only when return and payment is filed on time. (Multiply Item 4 by .03)		\$ _____
6. TOTAL TAX (Subtract Item 5 from Item 4)		\$ _____
7. PENALTY FOR LATE PAYMENT (Multiply Item 4 by .10)		\$ _____
8. INTEREST (10% <i>per annum</i> )		\$ _____
9. TOTAL TAX, PENALTY, & INTEREST DUE (Add Items 6, 7, and 8)		\$ _____

- A. Using figure in Item 9, make check, payable to: TOWN OF SOUTH BOSTON  
B. Check must accompany this report.  
C. Sign and date the declaration below.  
D. Retain YELLOW copy for your files and return WHITE copy with check attached to:

Director of Finance • Town of South Boston  
455 Ferry Street  
South Boston, Virginia 24592

TO AVOID PENALTY AND INTEREST CHARGES, THIS RETURN MUST BE FILED BY THE 20th DAY OF THE MONTH FOLLOWING THE CALENDAR MONTH FOR WHICH THE TAX IS DUE. THE TAX IS DUE MONTHLY.

**I declare that this report has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete return.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
AUTHORIZED REPRESENTATIVE OF COMPANY