

**MONTHLY RETURN OF HOTEL OCCUPANCY TAX
POCAHONTAS COUNTY, WEST VIRGINIA**

Please complete all fields legibly

For Month Ending:	
Due on or Before:	
Business Name:	
Business FEIN#:	
Contact Address:	
Contact Phone:	
LINE 1:	Gross "Hotel Room" Receipts <i>see WV Code 7-18-3 for definition details</i>
LINE 2:	Exemptions (attach copies of exemption certificates) <i>see WV Code 7-18-5 for details</i>
LINE 3:	Other Exemptions (provide reason below) <i>Please provide reason for other exemptions here:</i>
LINE 4:	Total Exempt Receipts (add lines 2 & 3)
LINE 5:	Net Taxable Receipts (Line 1 less Line 4)
LINE 6:	Tax Due (Enter 6% of Line 5)
LINE 7:	Credit or debit (Over or Underpayment in prior months)
LINE 8:	Delinquency Fee <i>5% 1st Month; 1% each additional month</i>
LINE 9:	Total Tax Due (sum Lines 6, 7, 8) <i>make checks, money orders, or bank drafts payable to POCAHONTAS COUNTY SHERIFF and mail completed return to: Pocahontas County Sheriff 900 10th Ave Ste A Marlinton, WV 24954</i>
Signature:	I hereby certify that the information and statements contained herein and in any schedule or exhibits attached are true and correct
Printed Name:	
Official Title:	
Date:	

NG-35408 - 12/2017

CASTO & HARRIS RE-ORDER# 19009-17

WHITE COPY - SHERIFF

CANARY COPY - ASSESSOR

PINK - OWNER/OPERATOR