MONTHLY RETURN OF TRANSIENT ROOM TAX
CALLOWAY COUNTY, KENTUCKY

Name:
Property
Address:
City ST Zip:

MONTH ENDING: _____

DUE DATE: 20th day of each month

1. Gross Room Rentals $ _____
2. Tax 3% on Line 1 $ _____
3. Penalty and/or Interest $ _____
4. Total Payment $ _____

Make Check Payable to: **Calloway County Fiscal Court**
Mail to: **Calloway County Treasurer, PO Box 164, Murray, KY 42071**

Interest - 10% per annum

I hereby certify that the statements made herein are true, correct and complete to the best of my knowledge.

Individual Preparing Return | Owner/Manager | Date

PLEASE RETAIN BOTTOM COPY FOR YOUR RECORDS.

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