



Calhoun County website: www.calhouncountymi.gov
 Accommodations Tax Ordinance: www.calhouncountymi.gov/assets/1/7/Accommodations_Ordinance.pdf
 Contact person: Heather Hoffman, phone (269)781-0810, fax (269) 781-0800, or email: hhoffman@calhouncountymi.gov
 Calhoun County Treasurer's Office, 315 West Green Street, Marshall, MI 49068

REMITTANCE FORM

Remittance from must be fully completed and enclosed with each check

Calhoun County Accommodation Tax for period Ending: _____ [month] _____ [year]

Payment must be received on or before the 15th each month or may be subject to penalty & interest

SECTION 1: Name and Address of Collecting Business:	Tax Department for Collecting Business:
Name of Provider	Name of management company
Street number and name	Attn: Name and title of person responsible
City, State ZIP	Mailing address
	Mailing address city, state ZIP

SECTION 2: Worksheet

Line No. 1	Reported Room Revenue <i>for period stated above</i>	\$
Line No. 2	Plus Cancellations and/or other No-Show fees	\$
Line No. 3	Less Exempt Room Revenue [only long-term]	\$
Line No. 4	Subtotal Total Room Revenue [sum of line 1 + line 2 + line 3]	\$
Line No. 5	5% Excise Tax [multiply line 4 X .05]	\$
Line No. 6	Plus any Penalty and Interest [see Ordinance]	\$
Line No. 7	Total Amount Due [sum of lines 5 and 6]	\$
Line No. 8	Total Amount Remitted	\$

SECTION 3: Preparer and Contact Information

Under penalty of perjury and to the best of my knowledge, I certify that the information provided is true, complete and accurate.

Signed: _____ Dated: _____

Printed Name: _____

Title: Owner _____ Manager _____ Accountant _____ Other : _____

Management Contact Information:

Phone number including area code _____ Email _____

Hotel Contact Information:

Phone number including area code _____ Email _____

Note: If no room revenue has occurred for a period, a remittance form still needs to be completed and sent in reporting "0".

Please make checks payable to: Calhoun County Treasurer

<p style="text-align: center;">Mail check and remittance form to:</p>	<p>Calhoun County Treasurer 315 West Green Street Marshall, MI 49068</p>
--	---