



## City of Horse Cave

Randall Curry, Mayor  
121 Woodlawn Avenue  
PO Box 326  
Horse Cave, Kentucky 42749

Phone: 270-786 2680 Fax: 270-786 2688  
E-mail: horsecave@hotmail.com

### MONTHLY RETURN OF RESTAURANT TAX

DUE ON OR BEFORE 20<sup>th</sup> day of month following

Business Name:

\_\_\_\_\_

Location Address:

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_

1. GROSS RETAIL RECEIPTS FROM FOOD & BEVERAGE SALES (Excluding Sales Tax)	\$ _____
2. TAX DUE (3% OF LINE 1)	\$ _____
3. PENALTY, if applicable (10% of line 2 plus 2% interest per month)	\$ _____
<u>TOTAL PAYMENT</u>	\$ _____

PENALTY AND INTEREST MUST BE INCLUDED IF PAYMENT IS NOT RECEIVED ON OR BEFORE THE 20<sup>TH</sup> DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE RESTAURANT TAX ACCRUES.

Please enclose a copy of your Sales & Use Tax Return for the month you are reporting; if you are reporting Sales & Use Tax on an annual or quarterly basis, please enclose a copy of your return the month it is due.

**I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN AND IN ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

Signed: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Signature of individual preparing return Title Date

