



BOTETOURT COUNTY, VIRGINIA

Chris Booth
Commissioner of Revenue

REPORT OF FOOD & BEVERAGE TAX COLLECTED FOR _____

Name:

Account # _____

Address:

Phone:

Email:

Mail this Monthly Report by the last day of the month (following the month during which the tax was collected.)

Attach a check or money order **payable to Botetourt County** in the amount of tax on item 7 below.

1. Total sales receipts \$ _____
2. Tax Due (4% of Line 1) \$ _____
3. Discount (3% of line 2) if remittance is not delinquent \$ _____
4. Adjustments to Prior Month's Report \$ _____
In the event taxable receipts for a prior month's report need correcting,
use this line to account for the correction.
5. Net Meals Tax Due \$ _____
6. Late Penalty (7% penalty if more than 5 days late. \$10 Minimum) \$ _____
Additional penalty and interest will apply when 30 days late.
7. Total Tax Due \$ _____

Mail to:

Botetourt Commissioner of Revenue
57 S Center Dr.
Daleville, VA 24083

Online Option:

<http://bocolinks.site/taxMeals>

Affirmation: I the Undersigned do affirm that the above amounts appearing on this report are true and correct to the best of my knowledge.

Signature _____ **Date** _____