Hotel Occupancy Tax
City of Bonham, TX

Remittance Address:
MuniServices, LLC
Attn: TX Hotel Occupancy Tax
PO Box 830725
Birmingham, AL 35283-0725
Phone (866) 240-3665 • Fax (855) 219-4338
Website: www.revds.com • Email: support@muniservices.com

Total Amount Remitted with This Return:
$_____

MAKE CHECK PAYABLE TO: TAX TRUST ACCOUNT
Do not staple or tape payment to your return. Do not send cash.

MuniServices Account #: _____

Filing Period: (If you are filing for more than one filing period, please complete a separate return for each filing period.)
Returns must be postmarked on or before the due date for the applicable filing period to avoid additional penalties and/or interest.

☐ **January/February/March** ☐ **April/May/June** ☐ **July/August/September** ☐ **October/November/December** **YEAR: 20** _____

Due Date: Must be postmarked on or before the last day of the month for the preceding month's taxes to be considered timely filed.
(Example: December's taxes are due on or before January 31th)

Total Rooms Available per Quarter: _____ *(Internal Code 8035 31-80)*
Actual Room Nights Rented per Quarter: _____ *(Internal Code 8035 31-81)*

Month	Total Gross Room Receipts	Less Authorized Exemptions (Complete Exemption Report)	Total Taxable Room Receipts Multiplied for 7% Tax
	$	$	$
	$	$	$
	$	$	$
Totals:	$	$	$

Penalties: $_____
5% penalty due if not timely filed and paid by due date.
An additional 5% penalty due if filed 30 days after due date.

Interest: $_____
Interest due if tax not filed and paid 60 days from due date
Calculate interest at 6% per annum

Quarterly Total $_____
(Internal Code 8035 30-11)

Detail Each Exemption Below

Please attach a separate form if needed for additional exemptions.

Types of exemptions allowed in the City of Bonham:
1. Permanent Residents or 2. Organizations Operated Exclusively for Religious, Charitable or Educational Purposes

Month	Type of Exemption	Total of Exemption

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief it is true, correct and complete.
Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Taxpayer's/Paid Preparer's Signature | Date Signed | Telephone | Fax

Printed Name | Email | FEIN

DISCLAIMER: Please note that the administration and rate changes on the MUNISERVICES, LLC Advisory and MUNISERVICES, LLC tax forms are updated once the required information has been received, verified and validated in compliance with MUNISERVICES, LLC policy. Any information received before or after the publication of a MUNISERVICES, LLC Advisory or tax form will not be guaranteed to appear on said forms until all such requirements have been met. MUNISERVICES, LLC is not responsible for incorrect information and/or improper use of the information provided. All updates are completed on a timely basis once the requirements have been met. For the most current MUNISERVICES, LLC administration and/or rate information provided, please visit our website at www.revds.com. **Returned Check Disclaimer:** Effective July 1, 2010, each returned item received by MUNISERVICES, LLC due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an effort to obtain payment. MUNISERVICES, LLC is not responsible for any additional bank fees that will accrue due to the resubmission of the returned item. Please see the full returned check policy at www.revds.com/taxpayer/return-check-disclaimer.