



City of El Campo (8041)
Hotel Occupancy Tax

Online filing at: www.salestaxonline.com

Toll Free Phone: (866) 240-3665 • Toll Free Fax: (855) 219-4338 • Email: support@muniservices.com • Online Filing: www.salestaxonline.com
City of El Campo • c/o MuniServices, LLC • PO Box 830725 • Birmingham, AL 35283-0725

MuniServices Account #: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

This space is for changes which have occurred since the last submitted report. If the business has been sold, indicate the new owner's name, mailing address and date of sale.

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Instructions: Select the applicable filing period and complete the information below for your Hotel Occupancy Tax. If payment is mailed, the envelope must be postmarked on or before the due date for the applicable filing period to avoid additional penalties and/or interest. If you are filing for more than one filling period, please complete a separate return for each period.

January-February-March April-May-June July-August-September October-November-December YEAR: 20\_\_

Due Date: Returns must be postmarked on or before the 20th of the month following the applicable filing period to avoid penalties and/or interest.

(Example: Quarter of January 1st through March 31st is due on or before April 20th)

Total room nights available: \_\_\_\_\_
(8041-31-80)

Actual nights rented: \_\_\_\_\_
(8041-31-81)

1. Gross room receipts before exemptions: \$ \_\_\_\_\_
(8041-30-11)

2. Minus legal exemptions:
Exempt status of any organization can be checked at: www.window.state.tx.us/taxinfo/hotel or by calling the Comptroller's office at: 1-800-252-1385.

- (a) Permanent residents (Stays of more than 30 days): \$ \_\_\_\_\_
(b) Federal employees: \$ \_\_\_\_\_
(c) Foreign diplomats: \$ \_\_\_\_\_
(d) Exemption certificate: \$ \_\_\_\_\_
(e) Total exemptions: \$ \_\_\_\_\_

3. Total taxable room receipts (line 1 minus line 2e): \$ \_\_\_\_\_

4. Total taxable room receipts multiplied by 7% (amount on line 3 x 0.07): \$ \_\_\_\_\_

5. Penalty (if applicable): \$ \_\_\_\_\_
10% applies if not filed and paid by due date.

6. Interest (if applicable): \$ \_\_\_\_\_
Calculate interest at 8% per annum if not filed and paid by due date

7. Total Amount Due (sum lines 4, 5 and 6): \$ \_\_\_\_\_
Make check payable to "Tax Trust Account"

\*\*\*Copies of the State of Texas Hotel Occupancy Tax Report(s) are required to be submitted with this report.\*\*\*

I declare, under penalties prescribed that the information provided in this return is true and correct to the best of my 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.
City of El Campo, TX Hotel Occupancy - Updated 03/2017