



**Town of White Stone**  
**Meals Tax Remittance**

Report for the Month of : \_\_\_\_\_ Year: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Location of Business \_\_\_\_\_

---

Gross Receipts for the Month:

\_\_\_\_\_

Less allowable deductions:

\_\_\_\_\_

Balance taxable:

\_\_\_\_\_

Tax (2.5%)

\_\_\_\_\_

Total tax due by the 20<sup>th</sup> (Make check payable to Town of White Stone)

---

Declaration of Seller:

I hereby swear to affirm the amount listed above are true and correct to the best of my knowledge and belief for the period stated above:

Sign Here: \_\_\_\_\_

Print name : \_\_\_\_\_ Title \_\_\_\_\_