



# HOTEL OPERATIONS OCCUPANCY TAX RETURN

LAWRENCE COUNTY  
PAUL DAVID KNIPP, AUDITOR

HOTEL NAME:

ADDRESS:

TAXES FOR MONTH:

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1. Total Non-Transient Rooms \_\_\_\_\_ Total Non-Transient Guests \_\_\_\_\_
  2. Total Transient Rooms \_\_\_\_\_ Total Transient Guests \_\_\_\_\_
  3. **Gross Room Sales**..... \$ \_\_\_\_\_
  4. **Exempt Sales** (Non-Transient Guests/ other – must provide attachments).....\$ \_\_\_\_\_
  5. **Net Taxable Sales** (line 3 minus line 4)..... \$ \_\_\_\_\_
  6. **Tax Due** (enter 3% of line 5)..... \$ \_\_\_\_\_
  7. **Adjustment** (for over or under payments of prior months)..... \$ \_\_\_\_\_
  8. **TOTAL TAX DUE** (sum of lines 6 & 7)..... \$ \_\_\_\_\_
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I declare that the information contained in this return is true, correct, and complete.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Title: \_\_\_\_\_

**Make Payment To:**  
Lawrence County  
Treasurer

**Enclose:**  
Tax return  
Payment

**Return To:**  
Lawrence County Auditor's Office  
111 South Fourth Street  
Ironton, Ohio 45638

\*Payments must be postmarked within 30 days from end of month in which taxes were collected.