



AMUSEMENT TAX RETURN

East Moline Code of Ordinance 19-15

Business Name: _____

Business Address: _____

Mailing Address: _____

Check here if above information is updated/changed

Federal I.D. Number: _____

Calendar month for which tax return applies: _____

1. Total Gross Receipts	\$ _____
2. Deductions (Attach Detailed Explanation)	\$ _____
3. Total Subject to Tax (subtract line 2 from line 1)	\$ _____
4. Tax Due (Line 3 X .03) 3% AMUSEMENT TAX	\$ _____
5. Late Filing Penalty (Line 4 X .10) 10% per month	\$ _____
6. Total Tax and Penalty Due (Add Lines 4 and 5)	\$ _____

INSTRUCTIONS FOR FILING:

TAX AMOUNT: Tax rate is 3% of total gross receipts.

DUE DATE: The completed return and payment shall be due and payable on the fifteenth day of the month following the preceding calendar month during with the gross payments were received.

PENALTY: Late charges are calculated at the rate of 10 percent (10%) per month. (5% late filing penalty and 5% late payment penalty)

REMITTANCE: Make checks payable and remit to: City of East Moline
Finance Office
915 16th Avenue
East Moline, IL 61244
(309) 752-1542

I certify under penalty as prescribed by law that I have examined this return, and to the best of my knowledge, it is true and accurate.

Signature of Preparer: _____ Printed Name: _____

Title: _____ Date: _____

Telephone Number: _____ Email: _____