



CITY OF TUSKEGEE  
P O BOX 830687  
TUSKEGEE AL 36083  
334-720-0543

## OCCUPATIONAL TAX REPORTING

BUSINESS NAME \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FOR THE MONTH/QUARTER: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

1 GROSS WAGES \_\_\_\_\_

2 TAXABLE WAGES \_\_\_\_\_

3 TOTAL TAX DUE (3% OF LINE 2) \_\_\_\_\_

4 Add 5% Penalty OF Line 3 ( min. \$25 If not paid by 25th) \_\_\_\_\_

5 Interest 1% (per mo) of Line 3 (If delinquent) \_\_\_\_\_

6 Total Remittance (Lines 3 thro Line 5) \_\_\_\_\_

\_\_\_\_\_  
Completed by: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_\_

Quarterly filers due 25th day of month following March 31, June 30, Sept. 30, & 31 days following Dec. 31.  
Monthly filers due by the 25th of each month.

Mail Report to the above address: Attn: Revenue Dept.