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CITY OF OAK FOREST

Growing Families,
Building a Community.

15440 South Central Avenue Oak Forest, Illinois 60452-2195
708.687.4050 • Fax 708.687.8817 • www.oak-forest.org

HOTEL ACCOMMODATION TAX

REMITTANCE FORM

Name: _____

Address: _____
Oak Forest, IL 60452

Phone No.: _____

Business License No.: _____

Gross Receipts from Room Rentals: _____ 10.0%

Remittance Amount (Gross Receipts times 10% (.10): _____ $0.00

I hereby certify under penalty of law that the above information represents the Gross Receipts for the _____ **Motel** and the appropriate Remittance for the Month of _____ .

Signature: _____

Printed Name: _____

Date: _____

MAIL THIS COMPLETED FORM AND YOUR CHECK FOR THE REMITTANCE AMOUNT ON OR BEFORE THE 15TH OF THE MONTH FOLLOWING THE REPORTED MONTH TO:

City of Oak Forest, Controller
City of Oak Forest
15440 South Central Avenue
Oak Forest IL 60452-2195

IF THERE ARE ANY QUESTIONS OR YOU NEED ADDITIONAL FORMS, PLEASE CALL THE CITY OF OAK FOREST AT 708-687-4050 EXTENSION 1003 OR 1002.

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