



Town of Middletown
7735 Main Street
Middletown, Virginia 22645
(540) 869-2226 ♦ Fax (540) 869-4306
Gateway to Cedar Creek and Belle Grove National Historical Park

MEALS TAX RETURN

Name of Business: _____

Mailing Address: _____

Business Telephone: _____ Email: _____

RETURN FOR THE MONTH OF _____ (Month) _____ (Year)

- | | |
|--|-------|
| 1. Total Gross Sales | _____ |
| 2. Total Deductions | _____ |
| 3. Amount on which tax is computed | _____ |
| 4. Tax
<i>(5% of line 3)</i> | _____ |
| 5. Penalty for late filing and payment
<i>(10% of line 4, whichever is greater)</i> | _____ |
| 6. Interest for late filing and payment
<i>(12% per annum line 5)</i> | _____ |
| 7. Total tax, penalty and interest due and payable | _____ |
| 8. Total due and payable | _____ |

I hereby declare that this meals tax return has been examined by me and to the best of my knowledge is a true, correct and complete return.

_____ (Date)

_____ (Printed Name)

_____ (Signature)

NOTE: This return must be filed even when no sales were made during the period. If a change of ownership has occurred, the new owner must register with the Town and the prior owner must advise the Town Office when making a Final Return. The Return must be signed and accompanied by the correct amount of payment due. Checks should be made payable to **TOWN OF MIDDLETOWN**, and either mailed or hand delivered to 7735 Main Street, Middletown, Virginia 22645, not later than the 20th of the month following the month covered in the Return.