LYNNWOOD WASHINGTON

CITY OF LYNNWOOD

ADMISSIONS TAX QUARTERLY REPORT FORM

For Quarter_____Year _____

State License Number (UBI): _____

Business Name and Address:

_____

_____

_____

_____

Remit payment to:
City of Lynnwood Attn: Treasury
19100 44th Ave W.
Lynnwood, WA 98036

Type of Business: Owner/ _____

Manager Name: _____

Telephone Number: _____

Number of Admissions	X	**Price per Admission**	=	**Taxable Admission**	X	**5%**	=	**Tax Due**
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
	X					x0.05		
TOTAL								

The undersigned taxpayer declares that he/she has read the foregoing and certifies it to be correct.

Dated this _____ day of (month), (year)

Signature: _____

Firm Name: _____

Admissions Taxes are due on or before the last day of the month following the end of each quarter:
1st Quarter: April 30th, 2nd Quarter: July 31st, 3rd Quarter: October 31st, 4th Quarter: January 31st

Penalties for late payments are as follows:

1 to 15 days Delinquent: 10% of tax due - Minimum penalty of $10.00
After 15 days Delinquent: 15% of tax due - Minimum penalty of $10.00