

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		
	X					x0.05		
TOTAL								

The undersigned taxpayer declares that they have 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 forty-fifth day following the end of each quarter:
1st Quarter: May 15th; 2nd Quarter: August 15th;
3rd Quarter: November 15th; 4th Quarter: February 15th

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