

**CITY OF SAPULPA  
DEPARTMENT OF FINANCE  
(918) 224-3040**

**HOTEL/MOTEL TAX PAYMENT RETURN**

Month	Year
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Name of Hotel/Motel	Has Ownership Changed Since the Last Return Was Filed? <input type="checkbox"/> No <input type="checkbox"/> Yes – New Owner Is:
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Address of Hotel/Motel

City, State, Zip

NOTE: Returns are due the 15<sup>th</sup> of each month, if a discount is taken for the preceding calendar month. See item 8. Returns become delinquent after the 16<sup>th</sup> day of each month for the preceding calendar month, however interest will be assessed starting on the 20<sup>th</sup> day of the month. See items 10 and 11.

1. GROSS RECEIPTS – All lodging furnished to guests exclusive of taxes.	\$
2. EXEMPT RECEIPTS – Rooms less that \$5.00 per day, complete reverse, Section A.	[Hatched Area]
3. EXEMPT RECEIPTS – Permanent guests, complete reverse, Section B.	
4. OTHER EXEMPTIONS – Complete reverse, Section C.	
5. TOTAL EXEMPT RECEIPTS – Add Lines 2, 3, and 4.	\$
6. NET TAXABLE RECEIPTS – Line 1 less Line 5.	\$
7. GROSS TAX DUE – Enter 5% of line 6.	\$
8. DISCOUNT - Enter 2.25% of Line 7 (ONLY if payment is received by the Department of Finance no later than 5:00 p.m. on the 15 <sup>th</sup> of each month; or if mailed, the envelope must be postmarked by the U.S. Postal Service no later than the 15 <sup>th</sup> of the month.)	\$
9. ADJUSTMENT - <input type="checkbox"/> Overpayment (-) for the month of: _____ (Explain in remarks section below) <input type="checkbox"/> Underpayment (+)	\$
10. INTEREST – 1.5% Per month prorated from the 20 <sup>th</sup> day of the month	\$
11. NET TAX DUE – Line 7 less Line 8, plus Lines 9, 10, and 11.	\$

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN AND ANY ACCOMPANYING EXHIBITS ARE TRUE AND CORRECT	Complete and Mail To: <b>CITY OF SAPULPA DEPARTMENT OF FINANCE 425 E DEWEY AVE SAPULPA, OK 74066</b>	<b>MAKE CHECK PAYABLE TO:</b>
Print or Type Name	Title	Date
Signature	Telephone No.	
Mailing Address	City, State, Zip	

Remarks

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FOR OFFICE USE ONLY

- INSTRUCTIONS: 1. All exemptions taken on the hotel/Motel Tax Payment Return must be documented on the Exemption sheet.  
 2. All Exemptions must be supported by copies of the folios, which should be submitted with the Hotel/Motel Tax Payment Return and this Exemption Sheet.  
 3. Please use a second page if you need more room for your exemptions.

**SECTION A**

EXEMPT RECEIPTS – ROOMS LESS THAN \$5.00 PER DAY

ALL rents are less than \$5.00 per day

TOTAL EXEMPT RECEIPTS – ROOMS LESS THAN \$5.00 PER DAY

AMOUNT

OCCASIONAL rents are less than \$5.00 per day

(Transfer to Line 2 of the Lodging Tax Payment Return)

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**SECTION B**

EXEMPT RECEIPTS – PERMANENT GUESTS (Definition: any person who has completed a 90 consecutive day residence requirement)

NAME	DATE CHECKED IN	DATE CHECKED OUT (If Applicable)	FOLIO NUMBERS (Attach copies)			AMOUNT

TOTAL EXEMPT RECEIPTS – PERMANENT GUESTS (TRANSFER TO LINE 3 OF THE LODGING TAX PAYMENT RETURN)

**SECTION C**

OTHER EXEMPTIONS (Governmental entities of the United States, the State of Oklahoma and its counties or municipalities, when billed directly for the room charges.)

NAME	GOVERNMENT AGENCY BRANCH OR DEPARTMENT	FOLIO NUMBERS (Attach copies)			AMOUNT

TOTAL OTHER EXEMPTIONS (Transfer to Line 4 of the Lodging Tax Payment Return)