



## CITY OF SUFFOLK ROOM TAX

SUSAN L DRAPER  
COMMISSIONER OF THE REVENUE  
PO BOX 1459  
SUFFOLK VA 23434  
(757) 514-4261

NAME :  
TRADE NAME :  
ADDRESS :

Acct#	Month of :	Due Date :
(1) Number of Rooms Rented During the Month		
(2) Tax Rate		<b>\$ 1.00</b>
(3) Total Tax (Line 1 x Line 2)		\$
(4) Penalty		\$
<b>TOTAL AMOUNT DUE</b>		\$

MAKE CHECKS PAYABLE TO TREASURER-CITY OF SUFFOLK

*I do swear that the figures are true to the best of my knowledge. SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_*