

Retain pink copy for your records and mail white and yellow copies with payment to the address below.

<p>CITY OF SANDPOINT Attn: Tax Department 1123 LAKE STREET SANDPOINT, ID 83864</p> <p>LOCAL OPTION TAX RETURN</p> <p>PERMIT NO: _____</p> <p>Reporting Period from: _____ to: _____</p> <p>Business Name: _____</p> <p>Attach a copy of Idaho Sales Tax Return for the Reporting Period.</p> <p>Tax payment due on or before the 20th of the following month. This return must be filed even though no tax may be due.</p> <p>Return check Charge \$ 20.00</p>	TAX CATEGORY	SALES	RATE	TAX DUE
	TOTAL SALES			
	LESS NON TAXABLE SALES			
	TOTAL LODGING SALES (OCCUPANCY OF 30 DAYS OR LESS) Multiply sales by tax rate		7%	
	TOTAL GENERAL SALES (LESS LODGING) Multiply sales by tax rate		1%	
	ADD AFTER DUE DATE: PENALTY OF 5% OF TAX DUE OR \$10, PLUS 1% INTEREST PER MONTH ON TAX DUE			
	TOTAL TAX DUE THIS PERIOD			
	I do hereby swear or affirm that the above information is true and correct to the best of my knowledge.			
Signature _____			Date _____	

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