



# Transient Lodging Tax Remittance Form Lodging Provider

(Effective for taxable rents 7/1/2020)

Hotel Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Location address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Period covered: \_\_\_\_\_

	Tax Calculation	Amount
1	Total gross monthly receipts from guest room rentals:	
	Less allowable deductions	
	2 Rent (by month):	
	3 Rent less than \$15 per day:	
	4 Government agency:	
	5 Uncollectable rents:	
	6 Gross receipts from transient lodging intermediaries for rooms booked during the reporting period (total from page 2):	
7	Total allowable deductions (add lines 2 through 6):	
8	Taxable rents (line 1 less line 7):	
9	Transient room tax (8% of line 8):	
10	Administrative fee (deduct 5% of line 9):	
11	Amount of tax due (line 9 less line 10):	
12	Penalty if not paid by due date (10% of line 11):	
13	Additional delinquent penalties & fees:	
14	Adjustment for prior return (supporting documentation required):	
15	<b>Total transient lodging tax payment submitted:</b>	

Number of Rooms: \_\_\_\_\_

**I declare, under penalty of making a false statement, that to the best of my knowledge and belief, the statements herein are correct and true.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Title

**Make checks payable to: CITY OF GRESHAM**

**Direct inquiries to:** City of Gresham, Finance & Management Services Department  
 Attention: Melanie Wynne  
 1333 NW Eastman Parkway  
 Gresham, OR 97030-3813  
 503-618-2713 or [Melanie.Wynne@GreshamOregon.gov](mailto:Melanie.Wynne@GreshamOregon.gov)

City Staff Only									
Tax due:		Received:		Over/short:		Interest due:		Penalties due:	

