

CITY OF FRANKLIN
BRENDA B. RICKMAN

LODGING TAX _____ (YEAR)
Checks payable to: City Treasurer
Mail To: P. O. Box 389
Franklin, VA 23851

Registration No..... _____
For Month of..... _____

Business Name:

Gross Receipts..... _____

8.00% Tax..... _____

Penalty & Interest.. _____

Total Remittance.. _____

I hereby certify that the figures shown on this form are in accordance with the Code of the CITY OF FRANKLIN

Signed