

City of Greenwood

PO Box 40 Greenwood, SC 29648 (864) 942-8420

HOSPITALITY FEE-MONTHLY RETURN

Period End: Due Date: Account #: Gross Receipts: Due:

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\$ _____ x 2% = \$ _____

Name of Business: _____

2% Discount if by due date (\$ _____)

+ 5% Penalty per month \$ _____

(if late)

Total \$ _____

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