City of Dallas Sales Volume Ratio and Return of Distilled Spirits Excise Tax Form

The City of Dallas levies an Excise Tax upon the retail sale of beverages containing distilled spirits purchased by the drink in the City in the amount of 3% of the purchase price of each drink. Excise Taxes collected are due to the City of Dallas on or before the 20th day of the month following the month in which the alcoholic beverages are sold by the retailer within the City. Failure to pay the excise tax by the due date will result in the imposition of penalty and interest. All checks, money orders, or cashier's checks shall be made payable to the City of Dallas and mailed with the completed and signed return form by the due date to the following address:

City of Dallas 200 Main St. Dallas, GA 30132

For Pe	riod of (Month/Year Reporting)	to	
Name	of Business:		
Owner	;		
Addres	ss: City,State,Zip:		
	Excise Tax Section		
1.	<u>Gross Receipts</u> – (All sales of Alcoholic Beverages by the drink)		\$
	(Amount should match Line 9 Minus Line 10)		
2.	Exempt Receipts – (All Alcoholic Beverages EXCEPT Distilled Sp	irits)	\$
3.	Net Taxable Receipts – (Line 1 Minus Line 2)		\$
4.	Tax Due before any adjustments (Line 3 x 3% (.03))		\$
5.	<u>Vendor's Credit:</u> (if paid on or before the 20 th of the Month)		\$
	(DEDUCT 3% (.03) of first \$3000 of Line 4 and ½% (.005) of amorexcess of \$3000 of Line 4)	ount in	
6.	Penalty (ADD 25% of Line 4 if paid AFTER the 20 th of the Month	1)	\$
7.	Interest (ADD 1% of Line 4 per month if paid AFTER the 20 th of		\$
8.	TOTAL AMOUNT DUE (Line 4 Minus Line 5 – <u>OR</u> – Line 4 Plus Lines 6 & 7)		
	Volume Ratio Section		
9.	Total Gross Receipts (All Combined Sales)		\$
10.	10. Total Merchandise, Services, or Food Sales (Other than Alcohol Beverages		\$
	Percent of Non-Alcohol Sales (Line 10 Divided by Line 9 x 100 e		%
	Percent of Alcohol Sales (Line 1 Divided by Line 12 x 100 equals	•	%
Refer to	o Code of Ordinances Section 4-32. – Imposition and rate of tax Section 4-83. – Sales volume ratio for select bus	inesses	
	y certify that the information and statements contained herein and in mplete to the best of my knowledge:	any schedule	of exhibits are true, correct,
Printed Name of Preparer: Title:			
Signatu	ire: Date:		