

**Town of Louisa**  
**212 Fredericksburg Avenue**  
**P.O. Box 531**  
**Louisa, Virginia 23093**  
**(540) 967-1400**

Taxes Collected During the Month of \_\_\_\_\_, 20\_\_\_\_\_.

Payment Made on \_\_\_\_\_, 20\_\_\_\_\_.

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City	State	Zip
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Phone Number: \_\_\_\_\_

1. Meals Charges Subject to Tax: \_\_\_\_\_
2. Tax on Meals @ 5.5% of (1): \_\_\_\_\_
3. Less 3% of Tax: \_\_\_\_\_
4. Total Tax due:  
Subtract (3) from (2) \_\_\_\_\_
5. Penalty (10% of tax due): \_\_\_\_\_  
(If paid after the 20<sup>th</sup> of the month for the prior month)
6. Interest to Date:  
(10% per annum if late) \_\_\_\_\_
7. **TOTAL DUE:** \_\_\_\_\_

This form must be filed by the 20<sup>th</sup> day of the month following the month taxed to avoid penalty and interest. Payment must be postmarked by the 20<sup>th</sup> to avoid penalty. Make checks payable to the **Town of Louisa**. For information, call the Town Office at (540) 967-1400.

I certify that the figures shown on this form are correct and in accordance with the Meals Tax Ordinance. I have examined this form and to the best of my knowledge, it is true, correct and complete.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_