



City of Mankato

LODGING TAX RETURN

For the month of:

Name of Lodging Facility:

Address:

State Sales Tax Number:

Gross Monthly Lodging Rent Receipts:

Less: Uncollectible Rents:

Balance (Subject to Tax):

Tax Due (3% of Previous Line):

Penalty and Interest (If Due):

Total Amount Due:

Signature: _____

Printed Name:

Title:

Date:

Make Check Payable To:

City of Mankato

Mail to:

City of Mankato

Attn: Director of Finance

P.O. Box 3368

Mankato, MN 56002-3368

Tax is due by the 25th day after the period reported