



**VILLAGE OF WEST BARABOO
ROOM TAX REPORT**

Fill in yellow sections of this report to calculate Room Tax for each month. You may submit payments monthly or quarterly.

Period Begin Date: _____ Period End Date: _____

Name of Establishment: _____

Owner or Manager: _____

Address of Establishment: _____

Use Wisconsin Sales and Use Tax Return Form ST-12 to calculate your room tax.

*****Attach a copy of your Wisconsin Sales & Use Tax Form ST-12 when submitting this report*****

Reporting Month: _____

Line 1- Form ST-12: Total Sales (Gross Receipts) _____

Line 6- Form ST-12: Total Deductions _____

Should = Line 7 Form ST-12: Net Taxable Earnings _____

Pay This Amount: _____ 6% Room Tax _____

Make Checks Payable to:

**Village of West Baraboo
500 Cedar Street
Baraboo, WI 53913**

Name of Preparer: _____

Date Prepared: _____

Mailing Address: _____
(If different from _____
Establishment) _____

Phone Number: _____

Signature of Preparer: