Public Accommodation Tax Return

Date:_____

Quarter Ended_____

Owner:_____

Address:_____

State & Zip Code:_____

Phone:_____

Email:_____

Contact Name:_____

Rabun County Marshal's Office
19 Jo Dotson Circle, Suite 221
Clayton, GA 30525
Phone: 706-782-2657 Fax: 706-212-2701
www.rabuncounty.ga.gov

Ashley Griffin, Administrative Asst.
Roy Lovell, County Marshal

	AMOUNTS DUE
Gross Room Rent or Charges Including Housekeeping fees	
Net Taxable Rent or Charges	
Amount of Tax Due X 5	
Less 3% of Tax Collection Fee if Submitted by the 15th	
Net Amount of Taxes Due	

Taxes due the 15th of the month following the quarter end date April 15th, July 15th, October 15th and January 15th. By submitting this report I certify that the above is a true And accurate representation of rental payments received for the period stated.