

# City of Bryant

## Supplemental Beverage Tax

Supplemental beverage taxes are due by the 20<sup>th</sup> of the month following the reporting month.

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

For the Month & Year: \_\_\_\_\_

Permit # \_\_\_\_\_

### On-Premises Consumption Permit

- |  |          |
|--|----------|
| 1.) Gross receipts from alcoholic beverage sales       | \$ _____ |
| 2.) Tax Due (line 1 X 10%)                             | \$ _____ |
| 3.) Penalty after the 20 <sup>th</sup> (10% of line 2) | \$ _____ |
| 4.) Total remittance                                   | \$ _____ |

I declare under penalty of perjury, that this return has been examined by me, and to the best of my knowledge and belief is a true, correct, and complete return.

_____	_____	_____
Name	Signature	Date

Make check payable to:  
City of Bryant  
c/o Code Enforcement  
312 Roya Lane  
Bryant, AR 72022

Please report any changes in contact information here:

Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Email Address \_\_\_\_\_  
Contact Person \_\_\_\_\_