

**CITY OF BENTONVILLE  
MONTHLY REPORT –  
ON PREMISE ALCOHOLIC BEVERAGE SALES/CONSUMPTION AND RELATED  
TAX**

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

FOR THE MONTH OF \_\_\_\_\_ YEAR: 20\_\_\_\_\_

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

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

Prepared by (please print): \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

- |   |          |
|---|----------|
| 1) GROSS RECEIPTS (from alcoholic beverage sales)       | \$ _____ |
| 2) TAX (5% of line 1)                                   | \$ _____ |
| 3) PENALTY AFTER THE 20 <sup>TH</sup> (12.5% of line 2) | \$ _____ |
| 4) CREDIT MEMO  | \$ _____ |
| 5) 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 & COMPLETE FORM

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**SEND PAYMENT AND REPORT TO:**

**CITY OF BENTONVILLE  
ATTENTION: ACCOUNTING  
1000 SW 14<sup>th</sup> St, BENTONVILLE, AR 72712**