



RETURN OF TRANSIENT LODGING TAX

LORAIN CITY TREASURER

605 WEST 4TH STREET, LORAIN OH 44052

Period From:	To:
Room Nights Available For Transients:	Nights Sold:
Name:	
Address:	

1	GROSS RENTS		
2	EXEMPT RENTS (permanent guests)		
3	OTHER EXEMPTIONS (attach exemption certificate)		
4	TOTAL EXEMPTIONS (add lines 2 and 3)		
5	TAXABLE RENTS (line 1 less line 4)		
6	3% OF TAXABLE RENTS		
7	TAX COLLECTED		
8	TAX DUE (larger of line 6 or 7)		
9	ADJUSTMENTS - Prior Period (attach explanation)		
10	PENALTY FOR LATE FILING (6% per month)		
11	TOTAL TAX DUE (sum of lines 8 thru 11)		

**Submit payment with a copy of this return.
Make check payable to: Lorain City Treasurer**

I hereby certify that the information and statements
contained herein and in any schedules of exhibits
attached are true and correct to the best of my knowledge.

Name:	Title:
Signature:	Date:

**Notify the Lorain City Treasurer of any change in
Ownership or Name and Address**