



MONTHLY TRANSIENT OCCUPANCY TAX RETURN & VCWTBID REMITTING

FACILITY NAME AND LOCATION

Hotel Name:
Owner Name:
Mailing Address:
City: State: Zip:

Account No.
Month Covered
Due Date

Instructions are on the reverse side of this Return Form. The Municipal Code regarding Transient Occupancy Tax (Chapter 4.115) can be found on the City's website at http://www.cityofventura.net/cm/municipal-code. For information regarding the collection and remittance of the VCWTBID, call the Business Tax Office at (805) 658-4715.

TRANSIENT OCCUPANCY TAX

No. of Rooms: [] Percent of Occupancy []%
TOTAL RENT COLLECTED FOR MONTH..... 1 []
RENT EXEMPT FROM TRANSIENT OCCUPANCY TAX 2 []
TAXABLE RENTS: Line 1 minus Line 2 3 []
TAX: 10% of Line 3 4 []
PENALTIES: See reverse side for calculation instructions..... 5 []
INTEREST: See reverse side for calculation instructions 6 []
TOTAL TRANSIENT OCCUPANCY TAX DUE (Add Lines 4 through 6) 7 []

VENTURA COUNTY WEST TOURISM BUSINESS IMPROVEMENT DISTRICT (VCWTBID)

RENT NOT SUBJECT TO VCWTBID ASSESSMENT: See reverse side 8 []
RENTS SUBJECT TO VCWTBID ASSESSMENT: Line 1 minus Line 8 9 []
VOCTBID ASSESSMENT: 2% of Line 9 10 []
PENALTIES: See reverse side for calculation instructions 11 []
INTEREST: See reverse side for calculation instructions 12 []
TOTAL VOCTBID ASSESSMENT DUE (Add Lines 10 through 12)..... 13 []
TOTAL DUE (Add Lines 7 and 13) 14 []

MAKE CHECKS PAYABLE TO CITY OF VENTURA

I declare that I am duly authorized to make these statements, and that, to the best of my knowledge and belief, the facts stated herein are true, correct and complete and are made in good faith for the period stated, in compliance with the San Buenaventura Municipal Code.

Signature Title
() Date
Phone No.

OFFICE USE ONLY
PMD CK#
CK \$

