

**TOWN OF HILLSVILLE
P. O. BOX 545
HILLSVILLE, VA 24343
276-728-2128**

MEALS TAX DUE FOR LABOR DAY FLEA MARKET

NAME _____

BUSINESS NAME _____

DAYTIME PHONE # _____

MAILING
ADDRESS _____

P.O. BOX/STREET

_____ CITY

STATE _____

ZIP CODE _____

FLEA MARKET LOCATION _____

- | | |
|---|----------|
| 1. GROSS MEALS RECEIPTS (do not include any tax receipts) | \$ _____ |
| 2. Meals Tax (8% of line 1) | \$ _____ |
| 3. Less Discount (3% of line 2 if paid before leaving Hillsville) | \$ _____ |
| 4. Total Meals Tax Due | \$ _____ |

PAYMENT MUST BE GIVEN TO THE PROPERTY OWNER FROM WHOM YOU RENT YOUR SPACE BEFORE LEAVING HILLSVILLE. THE PROPERTY OWNER WILL THEN PAY THE TOWN OF HILLSVILLE.

SIGNATURE _____ DATE _____