

**ADMISSIONS TAX REPORT**

CITY OF CHESAPEAKE, VIRGINIA

Return to: Ray A. Conner, Commissioner of the Revenue  
PO Box 15285, Chesapeake, VA 23328-5285  
(757) 382-6738 or 382-6739

ACCOUNT #:

For:

- 1. RECEIPTS SUBJECT TO TAX
- 2. TAX: 10% OF LINE 1
- 3. PENALTY
- 4. INTEREST
- 5. PRIOR BALANCE DUE
- 6. **TOTAL TAX DUE**

\_\_\_\_\_  
CERTIFIED SIGNATURE

\_\_\_\_\_  
DATE

(Applicant Name)

(Trade Name)

(Mailing Address)

(City, State, Zip)

**RETURN DUE AND PAYABLE ON OR BEFORE 20TH DAY OF REPORTING MONTH**  
**MAKE CHECKS PAYABLE TO CITY OF CHESAPEAKE (YOUR CHECK IS YOUR RECEIPT)**

(Complete and return upper portion with payment)

RETAIN THE LOWER PORTION OF THIS WORKSHEET FOR YOUR RECORDS

- 1 GROSS ADMISSION RECEIPTS (TOTAL FOR REPORTING MONTH)
- 2 DEDUCT VIRGINIA STATE SALES TAX COLLECTED (5%)
- 3 DEDUCT CITY ADMISSION TAX COLLECTED (10%)
- 4 DEDUCT ANY EXEMPT SALES (CERTIFICATES ON FILE)
- 5 **RECEIPTS SUBJECT TO CITY ADMISSION TAX**
- 6 MULTIPLY LINE 5 BY .10 (10%) = Tax Amount Due

**REMIT THIS AMOUNT**

DATE \_\_\_\_\_ CHECK NUMBER \_\_\_\_\_  
Make Checks Payable to **CITY OF CHESAPEAKE**

If remitting late payment after the 20th of the month deadline :

- 8 Multiply the tax amount due (line 6) by .05 (5%) = Penalty
- 9 Add line 7 to line 6 and remit Total Payment

**If the upper portion of this form shows a prior balance due, add that amount to your check. If the prior balance due is a credit (-), deduct this amount from your check.**

If you have any questions please contact:  
Commissioner of the Revenue's Office  
PO Box 15285, Chesapeake, VA 23328-5285  
(757) 382-6738 or 382-6739  
Fax: (757) 382-8822  
E-Mail: bustax@cityofchesapeake.net