Village of South Barrington
Food and Beverage Tax Return Form

PREPARED FOOD AND BEVERAGE TAX RETURN for Month Ending: _____

Returns are due the 20th of each month for the preceding month.

Illinois Business Tax Number: _____ Due Date: _____

BUSINESS NAME AND ADDRESS:

BILLING NAME AND ADDRESS (If different):

Business Phone: _____- _____- _____ For above address: _____- _____- _____

COMPUTATION OF TAX

1 Gross receipts from sale of prepared food and alcoholic beverages exclusive of all Taxes .....$ _____

2 Prepared Food and Beverage Tax - 1.50% of line 1 (Multiply line 1 by 0.0150).....$ _____

3 Late Payment Penalty – 2.00% per month or portion thereof if filed after due date if applicable. (Multiply line 2 by 0.02 times the number of months past due).....$ _____

4 TOTAL AMOUNT of tax due (Sum of lines 2 and 3).....$ _____

Attach to this form:

- ☐ Copy of your Illinois Department Of Revenue Form ST-1
- ☐ Check payable to Village of South Barrington

Provide the requested information below if the above business no longer incurs liability for the Food and Beverage Tax:

_____Business Sold/Discontinued _____ _____

Print or type – New owner's name Date

UNDER PENALTIES PROVIDED BY ORDINANCE, I hereby affirm that the statements herein contained are taken from the books and records of the above establishment and are true and correct to the best of my knowledge.

_____

Print Name and Title Phone

_____

Signature Date

Return to:

Village of South Barrington, Attn: Treasurer Office, 30 S. Barrington Rd, South Barrington, IL 60010