

VILLAGE OF HOFFMAN ESTATES

FOOD & BEVERAGE AND PACKAGE LIQUOR TAX REMITTANCE FORM

	(Office use only)
Date Paid:	
Amt. Paid:	
Postmark:	
Check #:	

Title

		Phone		
	State	IL	Zip	
		Phone		
		State, Zip		
Computatio	on of Tax Liabil	ity:		
	Food & E	<u>Severage</u>		<u>Package Liquor</u>
	\$			\$
		2%		5%
ltiplied by Tax Rate)	\$			\$
Late Payment Penalty (line 3 multiplied by 2%)				\$
Total Amount Due (line 3 plus line 4)				\$
Hoffman Estates. This form corresponding period must a wed by the Village at the add if the 20th of the month falls usiness day. However, a part onth falls on a Sunday or not by the next business day. dinance, I hereby affirm that	and a copy of ccompany your ress shown belon a Sunday or ayment sent by ational holiday of the statements	the Illinois Dep r remittance. ow by the 20th r holiday when mail must be p when the U.S.	oartment of F of the mont the Village costmarked r Postal Servi	Revenue Form ST-1 th following the month Hall is closed, payment no later than the 20th of ce is closed, the
man Estates everage Tax ell Road es, IL 60169	- - -		Da Signa Printed	ture
	Computation Computation Itiplied by Tax Rate) Ity (line 3 multiplied by 2%) Itine 3 plus line 4) Itine 3 plus line 4) Itine 3 multiplied by 2%) Itine 3 plus line 4) Itine 3 plus line 4) Itine 3 multiplied by 2%) Itine 3 plus line 4) Itine 3 plus line 4 Itine 4 plus line 4 Itine 3 plus line 4 Itine 4 plus line	Computation of Tax Liabil Food & E \$ Itiplied by Tax Rate) ty (line 3 multiplied by 2%) Itine 3 plus line 4) S S S S S S S S S S S S S	Computation of Tax Liability: Food & Beverage \$ 2% Itiplied by Tax Rate) \$ ty (line 3 multiplied by 2%) \$ ated on line 5 above. A single check for both amounts is Hoffman Estates. This form and a copy of the Illinois Department of the 20th of the month falls on a Sunday or holiday when usiness day. However, a payment sent by mail must be ponth falls on a Sunday or national holiday when the U.S. d by the next business day. dinance, I hereby affirm that the statements contained he and are true and correct to the best of my knowledge. and copy of ST-1 return to: man Estates everage Tax ell Road es, IL 60169	Phone State, Zip Computation of Tax Liability: Food & Beverage \$ 2% Itiplied by Tax Rate) \$ ty (line 3 multiplied by 2%) Itine 3 plus line 4) \$ ated on line 5 above. A single check for both amounts is acceptable. Hoffman Estates. This form and a copy of the Illinois Department of Fooreresponding period must accompany your remittance. If the 20th of the month falls on a Sunday or holiday when the Village usiness day. However, a payment sent by mail must be postmarked in onth falls on a Sunday or national holiday when the U.S. Postal Servid by the next business day. Idinance, I hereby affirm that the statements contained herein are take and are true and correct to the best of my knowledge. In and copy of ST-1 return to: The provided in the provided in the statements contained herein are take and are true and correct to the best of my knowledge. In and copy of ST-1 return to: The provided in the provided in the statements contained herein are take and are true and correct to the best of my knowledge. The provided in the pro

(Forms available online at www.hoffmanestates.org)