

City of Stafford  
Monthly Report  
Hotel/ Motel Occupancy Tax

Tax Report for the month of \_\_\_\_\_, 20\_\_\_\_

Name of Business: \_\_\_\_\_

Physical Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Total Number of Rooms Rented for Report Period: \_\_\_\_\_

Total Number Taxable Rooms Rented for Report Period: \_\_\_\_\_

Total Rooms Receipts \_\_\_\_\_

Total Number Taxable Receipts \_\_\_\_\_

Total Tax due @ 6% \_\_\_\_\_

Discount @ 1% \_\_\_\_\_

Penalty \_\_\_\_\_

Total Due \_\_\_\_\_

I \_\_\_\_\_ declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief.

Signature of Owner or Officer \_\_\_\_\_ Date: \_\_\_\_\_

FOR PAYMENT ONLINE GO TO: <https://certifiedpayments.net/index.aspx?BureauCode=4230396>

AND Email Form to: [ar@staffordtx.gov](mailto:ar@staffordtx.gov) (when paying online)

**You must include a copy of your state report and return to:**

**City of Stafford  
Finance Department  
2610 S. Main St.  
Stafford, TX 77477**

Please do not write in the space below (City Use only)

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\_\_\_\_\_  
Date received

\_\_\_\_\_  
Received by