

City of Lakewood

Utility Tax Reporting Worksheet

400:129

Vendor Information:

Vendor: _____
 Contact Name: _____
 Address: _____
 City: _____
 State: _____
 Phone #: _____
 FAX #: _____

Remit To:

City of Lakewood
 Finance & Information Systems
 6000 Main Street SW
 Lakewood, WA. 98499
 Phone: (253) 589-1289
 FAX #: (253) 983-7895

Reporting Period: Month _____ Year _____

Business Type:	Gross Income:	Allowable Deductions: *	Net Amount:	Rate:	Tax Payment:
Electric Services				5.00%	
Gas Services				5.00%	
Video Services				6.00%	
Cable Services				6.00%	
Cellular Phone Services				6.00%	
Telephone Services				6.00%	
Pager Services				6.00%	
Toll Services				6.00%	
Switching Services				6.00%	
Microwave Services				6.00%	
Telegraph Services				6.00%	
Garbage Services				6.00%	
TOTAL:					

** Copies of the Utility Tax Reduction Worksheet(s) must accompany remittance.*

Name of Employee Preparing Return: _____ (Please Print)

Date the remittance was prepared: _____

Date the remittance was submitted to Finance: _____

Finance Use Only

Date Received in Finance: _____ Check #: _____