

CITY OF OMAHA VEHICLE RENTAL OCCUPATION TAX QUARTERLY REMITTANCE RETURN

Occupation Tax for the _____ Quarter, _____

Nebraska I.D. Number _____

LOCATION:

Company: _____

Address: _____

City: Omaha, State: NE

Zip Code: _____

MAILING ADDRESS:

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Contact Phone Number: _____

Line 1 Total Rental Transactions for Quarter _____

Line 2 Amount owed to the City (line 1 x \$8.00) _____

Line 3 Adjustments from prior months. Explanation attached. _____

Line 4 Penalty and/or interest from previous months _____

Line 5 Total amount owed to City _____

Sign Here _____
Authorized Signature
Title

Date: _____

If you have questions please contact: Robert Stungis 444-3882

Please send two copies of this form and the amount on Line 5 to:
CITY CENTRAL CASHIER, RM. H10
OMAHA/DOUGLAS COUNTY CIVIC CENTER
OMAHA, NE 68183

	<u>Quarter Ending</u>	<u>Due Date</u>
1st	March 31	April 15
2nd	June 30	July 15
3rd	September 30	October 15
4th	December 31	January 15

Vehicle Rental Transactions Subject to Tax	
<u>Month of Quarter</u>	
1st	
2nd	
3rd	
Totals	