



City of Cathedral City

Department of Finance

CANNABIS AND MARIJUANA TAX REMITTANCE FORM

(For collectives operating with a valid city-issued permit)

Business Name: _____ FEIN OR SSN: _____

Address: _____

Phone Number: _____ G/L Number: _____

Owner Name: _____ Email: _____

MONTH OF	DUE DATE	DELINQUENT IF NOT RECEIVED BY
August	September 30, 2016	September 30, 2016

The information that you provide in this remittance form will be maintained as confidential under Rev. and Tax Code § 7284.6.

1. Gross receipts for the period:		
2. Add increasing adjustments – Prior months (explain)		
3. Adjusted Gross Receipts (add lines 1 and 2)		
4. Decreasing adjustments – Prior months (explain)		
5. Total deductions from line 4		
6. Taxable receipts (line 3 less line 5)		
7. Amount of tax due (10% of line 6)		
8. Penalty of 25% on tax due if not received in our office by the date shown above.	25% Penalty	
9. Interest of 1/2% per month on any unpaid tax and penalty not received in our office by the original due date.	1/2% Interest	
10. Tax adjustment – Per correction notice from City if applicable		
11. Total amount due and payable (lines 7 through 10)		

Remit To: **City of Cathedral City**
Attn: Finance Depart – Cannabis & Marijuana Tax
68-700 Avenida Lalo Guerrero
Cathedral City, CA 92234

Please note, all taxes collected during any given month must be received by the City no later than the end of the following month. Penalties and interest will be imposed on delinquent payments. See Sec. 3.48.03.

Please prepare a separate remittance form for each tax period; do not combine tax period.

Signed _____ Title _____ Date _____

Executed at Cathedral City or _____