

CITY HALL

400 Ella Street | Beatrice, NE 68310 Phone: 402.228.5200 Fax: 402.228.2312

SERVICE CENTER

500 North Commerce Street | Beatrice, NE 68310 Phone: 402.228.5211 Fax: 402.223.5181

911 SERVICE SURCHARGE OCCUPATION TAX MONTHLY REMITTANCE REPORT (due within 60 days of calendar quarter)

Reporting Period: thro		through	gh		
FEIN:	·				
Compan	y Name:				
Address	:				
	te, ZIP:				
Phone:	Fa	x:			
Contact	Person:				
	Number of E911 Lines Billed	_			
	Tax Rate			\$1.00	
	Gross Tax (due within 60 days of calendar quar	ter) <u> </u>	\$		
	Less: Credit Applied	_ <u>.</u>	\$		
	TOTAL REMITTANCE	<u>:</u>	\$		
I hereby	certify that all information provided herein is true, co	mplete, and accu	rate to	the best of my knowledge.	
				Date:	
Signatur	re				
Printed I	Name/Title				
REMIT TO:		-	QUESTIONS:		
City Beatrice % City Clerk			Hannah Bell, Finance Director Phone: 402-228-5200		
400 Ella Street		Fax		402-228-2312	
Beatrice, NE 68310			nail :	hbell@beatrice.ne.gov	