

**Town of Westport**  
5387 Mary Lake  
Waunakee, WI 53597

**Overnight Lodging Tax Quarterly Reporting Form**

**Company:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Mailing Address (if different from above)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***DUE last day of the month following quarter being reported. UNPAID TAXES  
BEAR interest at 18% per annum from due date until 1<sup>st</sup> day of month following  
month of payment.***

**Year:** \_\_\_\_\_ **Quarter:** 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> ☐

**COMPLETE ALL SECTIONS - Attach a copy of your State Tax Report.**

1. Lodging Receipts (From line 1 sales tax report)	\$ _____
2. Deduct Exemptions Attach supporting documents for all exemptions	_____
3. Taxable Lodging Receipts	\$ _____
4. TOTAL TAX DUE: (5% of Line 3)	\$ _____

MAKE CHECKS PAYABLE TO TOWN OF WESTPORT