



CITY OF THORNTON E-911 AUTHORITY
 ATTN: FINANCE DEPARTMENT
 9500 CIVIC CENTER DRIVE
 THORNTON, CO 80229
 303-538-7400

BUSINESS NAME: _____

LICENSE NUMBER: _____

REPORTING PERIOD: _____

LINE COUNT: _____

SURCHARGE: _____ **\$1.97**

TOTAL: (Line Count * Surcharge) _____

ADD: (Excess Tax Collected) _____

ADJUSTED CITY TAX: _____

ADMINISTRATIVE FEE: (2%)
 (deduct if paid on time) _____

LATE FILING PENALTY:
 (15%) _____

LATE FILING INTEREST:
 (1.00% per month x surcharge due) _____

TOTAL DUE AND PAYABLE: _____

PAYMENT DUE LAST DAY OF MONTH FOLLOWING END OF REPORTING PERIOD

SIGNATURE: _____

NAME: _____

TITLE: _____

PHONE: _____

DATE: _____