

IMO STATE GOVERNMENT

IMO STATE INTERNAL REVENUE SERVICE



FORM C CONSUMPTION TAX RETURNS FORM FOR HOSPITALITY BUSINESSES

FORM C₁

RETURNS FROM ROOM SALES / LODGEMENT / RESERVATION / ACCOMMODATION																		
This Return Covers	М	М	1	Be	ginning		1	D	М	MY	Y	Ending	DIMSSB	D	М	MY	Y	
Company / Business Na Company / Business Br	me:	1 & 444.		58 X			-	47.2			-		TEL NO): <u> </u>				
Company / Business Br Email Address	anch Physi	cai Addin	255.	<u> </u>					- 12				WEBSI					
Seating Capacity / Size				Hig	ghest Rate	of Food /	Drink	1			Lo	vest Rate	of Food	I / Drink		_		
	DAILY SALES TRANSACTION SUMMARY / INCOME RECORD FROM SALES OF FOOD / SNACKS / DRINKS															(S		
Date	Number of Rooms / Suites Sold			G	Gross Sales (N)			7.5% Value Added Tax Charged From Sales (N)			Net Sales (N)			5% Char	5% Consumption Tax Charged From Sales (N)			
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MONTH	ILY TO	OTAI	<u> </u>	N			N				N			N				
5% Consumption Tax Collected For The Month In Words:																		
DECLARATION: I declare that the particulars in this return and the accompanying schedules (Sales and Supplies records) are correct and complete in accordance with the provisions of The Imo State Hotel Occupancy and Restaurant Consumption Tax Law No: 35 of 2019															ie			
Name:												Signature						
Designation FOR IIRS OFFICE USE ONLY												Date:						
	- 12				FUR IIF	KS OFFI	UE USE	UNLY				Signatur	·a					
Name:	2										102	Date:	-					
Designation NOTE:												Joure.						
1. This Form Should Be Filled On Daily Basis And Filed On Or Before The 20th Of Every Month Alongside The TSA Payment Receipt.																		
Inis Form Should IlRS Officers Shall Wa																e On Ti	e Form	
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There Should Be No Mutilation On This Form Commission Of Any Of The Following Shall Be Punishable, In Line With The Provision Of The Imo State Hotel Occupancy And Restaurant Consumption Tax Law.														x Law.				
No: 35 Of 2019:																		
I. Failure To Fill This Form On Daily Basis.																		
ii. Failure Or Late Remittance Of Returns On Monthly Basis.																		
iii. Late Filling Of This Form With The TSA Receipt.																		
REMARK OF III	RS STAFF	ON CO							5 10			10.0			30 350			
	<u> </u>		Yo	u Can Als	so Downl	oad This	FORM F	om ime	ostate.	.tax	, p		3100				et.	
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