**CITY OF BLACK HAWK**

**SALES/USE/LODGING/DEVICE TAX RETURN**

**ATTN: FINANCE DEPARTMENT**

**POST OFFICE BOX 68**

**BLACK HAWK, CO 80422**

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**FILING PERIOD** | **DATES COVERED** | **DUE DATE** | **CITY LICENSE #**
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**COMPANY NAME AND ADDRESS**

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**1 Gross receipts** from all City activities, including sales, rentals, leases, and all services both taxable and non-taxable

**2 Bad debts collected**

**3 Total Receipts** Line 1 + Line 2

**4 Allowable deductions** (select from drop-down list)

- **Select:**
  - 4a
  - 4b
  - 4c
  - 4d
  - Other Deductions

**5 Net taxable sales and service** Line 3 less Line 4f

**SCHEDULE A LODGING TAX**

**Total lodging sales**

**Allowable deductions**

**Sales to gov't, religious, charitable entities**

**Complimentary lodging**

**Lodging sales >= 30 consecutive days**

**Total deductions**

**Net taxable lodging sales**

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**SCHEDULE B USE TAX**

The Black Hawk Municipal Code imposes a tax upon the privilege of using, storing, distributing or otherwise consuming in the City tangible personal property or taxable services purchased, rented or leased from sources outside the City on which a Municipal Sales Tax has not been paid.

**Gross purchases subject to Use tax**

**Food or beverage items provided on a complimentary basis**

**Net purchases subject to Use tax**

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**PREPARER CERTIFICATION** *(this return MUST be signed)*

**Signature**

**Date**

**Printed Name**

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**SCHEDULE C DEVICE FEES** *(CASINOS ONLY)*

**Device Count - Slots**

**Device Count - Live Table Games**

**Total Device Count**

**General Device Fee**

**Monthly fee-Slots** $ 87.50 = -

**Monthly fee-Table Games** $ 350.00 = -

**General device fees due with this return**

**Transportation Device Fee**

**Monthly fee** $ 3.39 = -

**Transportation device fees due with this return**

**Ambulance Device Fee**

**Monthly fee** $ 2.50 = -

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**Printed Name**

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Contact info: Telephone and Email