

**CITY OF ANDERSON**

601 South Main Street Anderson, SC 29624 (864) 231-2213

**2% HOSPITALITY FEE**

**\*\*A COPY OF THE STATE ST-3 TO INCLUDE THE WORK SHEET MUST BE REMITTED\*\***

MONTH OF: \_\_\_\_\_ DUE DATE: \_\_\_\_\_ CITY BUSINESS LICENSE ID # \_\_\_\_\_  
(IN OFFICE OR U.S. POSTMARKED)

NAME, ADDRESS & PHONE #: \_\_\_\_\_ GROSS PROCEEDS \$ \_\_\_\_\_  
\_\_\_\_\_ 2% OF GROSS PROCEEDS \$ \_\_\_\_\_  
\_\_\_\_\_ 2% DISCOUNT (if pd by due date) - \$ \_\_\_\_\_  
\_\_\_\_\_ 5% PENALTY (per mth if not pd by due date)+ \$ \_\_\_\_\_  
\_\_\_\_\_ TOTAL DUE \$ \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ (must be signed) I HEREBY CERTIFY THAT I HAVE EXAMINED THIS RETURN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS A TRUE AND COMPLETE RETURN.

**IF YOU WISH TO PAY BY CREDIT CARD, PLEASE COMPLETE BACK OF THIS FORM**

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