County of Annapolis PO Box 100. 752 St. George St. Annapolis Royal, NS BOS 1A0 Monthly Marketing Levy Remittance Report **Reporting Period:** From To dd mm УУ dd уу **Registrant Information:** 1. Registration Number: 2. Corporate Name: 3. Operating Name: (If different from above) 4. Contact Name: 5. Telephone Number: **Remittance Information** 6. Total Room Revenue for Period: 7. (Deduct): Adjustments for Bad Debts and Refund due to Errors: 8. Add: Adjustments to Revenue: 9. Adjusted Room Revenue subject to Levy in reporting period: 10. Marketing Levy Collected: 11. Marketing Levy Remitted: 12. Total Number of Available Room Nights This Month 13. Total Number of Room Nights Sold This Month (Amount collected should equal amount remitted. Explain any variances below) Make Cheque payable to: Municipality of The County of Annapolis Remittance due by 15th of each month for the previous month. Signature- Authorized Signing Officer Date