



**Temporary Sales Booth – Registration Form
(To Be Returned to City Hall Prior to Event)**

Date of Event: _____

Name of Organization: _____

Address of Organization: _____

Colorado Sales Tax License Number: _____

Location site of sales: _____

Contact Name: _____

Contact Phone Number: _____

I understand that this organization is responsible for collecting 2.50% sales tax on gross sales and remitting payment to City of Wray by day following event.

Contact Signature: _____

For Internal Use Only

Received By: _____ Date: _____

Payment: Dropped Off: _____ Mailed: _____



**Temporary Sales Booth – Sales Tax Remittance
(To Be Returned to City Hall After Event)**

Date of Event: _____

Name of Organization: _____

Amount of Gross Sales: \$ _____

Gross Sales x 2.50% (City Sales Tax) = Total Tax Due

Total Tax Due \$ _____

I understand that this organization is responsible for collecting 2.50% sales tax on gross sales and remitting payment to City of Wray by day following event.

Payment may be dropped off at City Hall (after hours drop box available) or mailed (prior approval only) to: City of Wray
P.O. Box 35
Wray, CO 80758

Contact Signature: _____

For Internal Use Only

Received By: _____ Date: _____