Voucher No. 01	Voucher No. JANUARY 2020	Due Date FEB. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Due Date FEB. 20, 2020	CITY OF GO	OSE CREEK	\$
	HOSPITA	LITY FEE	Multiply sales by 2% \$
Check No.			Penalty \$
	Customer#		TOTAL DUE \$
Date Paid	Business Name:		
	Contact Name: Mailing Address: City:	State: Zip:	This coupon must accompany payment of Fees for proper credit.
Amount			Make checks payable to:
\$	Property Address:		City of Goose Creek
Remit payn		es a 5% per month penalty and fines i	up to \$500) r 1768, Goose Creek, South Carolina 29445
Remit payn Voucher No.		itality Fee Division, P.O. Drawer	
Voucher No.	Voucher No.	itality Fee Division, P.O. Drawei	r 1768, Goose Creek, South Carolina 29445 Gross Proceeds
Voucher No. 02 Due Date	Voucher No. FEBRUARY 2020 CITY OF GO	Due Date MAR. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Voucher No. 02 Due Date	Voucher No. FEBRUARY 2020 CITY OF GO	Due Date MAR. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Voucher No. 02 Due Date MAR. 20, 2020	Voucher No. FEBRUARY 2020 CITY OF GO	Due Date MAR. 20, 2020	Gross Proceeds From the Meals, Food and Beverages ### Multiply sales by 2% \$
Voucher No. 02 Due Date MAR. 20, 2020	Voucher No. FEBRUARY 2020 CITY OF GO HOSPITA Customer # Business Name:	Due Date MAR. 20, 2020	Gross Proceeds From the Meals, Food and Beverages ### Multiply sales by 2% \$ Penalty \$ TOTAL DUE \$ This coupon must accompany payment
Voucher No. 02 Due Date MAR. 20, 2020 Check No.	Voucher No. FEBRUARY 2020 CITY OF GO HOSPITA Customer # Business Name: Contact Name: Mailing Address:	Due Date MAR. 20, 2020 OSE CREEK LITY FEE	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$ Penalty \$ TOTAL DUE \$
Voucher No. 02 Due Date MAR. 20, 2020 Check No. Date Paid	Voucher No. FEBRUARY 2020 CITY OF GO HOSPITA Customer # Business Name: Contact Name:	Due Date MAR. 20, 2020 OSE CREEK LITY FEE	Gross Proceeds From the Meals, Food and Beverages ### Multiply sales by 2% \$ Penalty \$ TOTAL DUE \$ This coupon must accompany payment

Remit payment to: City of Goose Creek, Hospitality Fee Division, P.O. Drawer 1768, Goose Creek, South Carolina 29445

(Failure to pay on time carries a 5% per month penalty and fines up to \$500)

			Gross Proceeds From the Meals, Food and Beverages
Voucher No.	Voucher No.	Due Date	,
03	MARCH 2020	APR. 20, 2020	\$
Due Date APR. 20, 2020	CITY OF G	OOSE CREEK	
			Multiply sales by 2% \$
	HOSPIT	ALITY FEE	Penalty \$
Check No.			TOTAL DUE \$
	Customer#		
Date Paid	Business Name:		This coupon must accompany payment of Fees for proper credit.
	Contact Name: Mailing Address:		Make checks navehle to:
Amount	City:	State: Zip	Make checks payable to: City of Goose Creek
\$	Property Address:		L
S	ignature	carries a 5% per month penalty and fines up	
	(Failure to pay on time t	carries a 5% per month penaity and lines up	0 (0 \$500)
Remit pay	ment to: City of Goose Creek, Ho	ospitality Fee Division, P.O. Drawer '	1768, Goose Creek, South Carolina 29445
			Gross Proceeds
Voucher No. 04	Voucher No. APRIL 2020	Due Date MAY 20, 2020	From the Meals, Food and Beverages
Due Date MAY 20, 2020	CITY OF G	OOSE CREEK	\$
	3111 31 3		
	HOSPIT	ALITY FEE	Multiply sales by 2% \$
Check No.			Penalty \$
	Customer#		TOTAL DUE \$
Date Paid	Business Name:		This coupon must accompany payment of Fees for proper credit.
	Contact Name: Mailing Address:		——————————————————————————————————————
Amount	City:	State: Zip	Make checks payable to:
\$	Property Address:		City of Goose Creek
S	ignature	carries a 5% per month penalty and fines up	a to \$500)
	(Failule to pay off time t	arries a 570 per month penalty and lines up	ιο ψουο)

Remit payment to: City of Goose Creek, Hospitality Fee Division, P.O. Drawer 1768, Goose Creek, South Carolina 29445

Voucher No. 05	Voucher No. MAY 2020	Due Date JUN. 20, 2	Gross Proceeds
Due Date JUN. 20, 2020	CITY OF G	DOSE CREEK	\$
Check No.	HOSPITA	ALITY FEE	Multiply sales by 2% \$
	Customer #		Penalty \$
Date Paid	Business Name:		TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State: Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:		Make checks payable to: City of Goose Creek
Remit payn Voucher No. 06			Gross Proceeds
Due Date JUL. 20, 2020		DOSE CREEK	\$
Check No.	позыл	ALITY FEE	Multiply sales by 2% \$
	Customer#		Penalty \$
Date Paid	Business Name:		TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State: Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:		Make checks payable to: City of Goose Creek

Signature _______(Failure to pay on time carries a 5% per month penalty and fines up to \$500)

Voucher No. 07	Voucher No. JULY 2020		ie Date JG. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Due Date AUG. 20, 2020	CITY OF G	OOSE CRE	EK	\$
Check No.	HOSPIT	ALITY F	EE	Multiply sales by 2% \$
	Customer#			Penalty \$
Date Paid	Business Name:			TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State:	Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:	Sale.	249	Make checks payable to: City of Goose Creek
	Failure to pay on time (Failure to pay on time)	·		o to \$500) 1768, Goose Creek, South Carolina 29445
Voucher No.	Voucher No. AUGUST 2020		ie Date P. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Due Date SEP. 20, 2020	CITY OF G	OOSE CRE	EK	\$
Check No.	HOSPIT	ALITY F	EE	Multiply sales by 2% \$
	Customer #			Penalty \$
Date Paid	Business Name:			TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State:	Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:		- -r	Make checks payable to: City of Goose Creek

(Failure to pay on time carries a 5% per month penalty and fines up to \$500)

Signature_

Voucher No. 09	Voucher No. SEPTEMBER 2020	_	ue Date CT. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Due Date OCT. 20, 2020	CITY OF GO	DOSE CR	EEK	\$
Check No.	HOSPITA	ALITY F	EE	Multiply sales by 2% \$
———	Customer #			Penalty \$
Date Paid	Business Name:			TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State:	Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:			Make checks payable to: City of Goose Creek
	ignature(Failure to pay on time ca ment to: City of Goose Creek, Hos			up to \$500) 1768, Goose Creek, South Carolina 29445
	(Failure to pay on time ca	pitality Fee Div		
Remit payr	Voucher No. OCTOBER 2020 CITY OF GO	pitality Fee Div	rision, P.O. Drawer ue Date OV. 20, 2020	1768, Goose Creek, South Carolina 29445 Gross Proceeds
Remit payr Voucher No. 10 Due Date	(Failure to pay on time ca	pitality Fee Div	rision, P.O. Drawer ue Date OV. 20, 2020	1768, Goose Creek, South Carolina 29445 Gross Proceeds From the Meals, Food and Beverages
Remit payr Voucher No. 10 Due Date NOV. 20, 2020	Voucher No. OCTOBER 2020 CITY OF GO	pitality Fee Div	rision, P.O. Drawer ue Date OV. 20, 2020	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$ Penalty \$
Remit payr Voucher No. 10 Due Date NOV. 20, 2020	Voucher No. OCTOBER 2020 CITY OF GO HOSPITA	pitality Fee Div	rision, P.O. Drawer ue Date OV. 20, 2020	Gross Proceeds From the Meals, Food and Beverages Multiply sales by 2% \$
Remit payr Voucher No. 10 Due Date NOV. 20, 2020 Check No.	Voucher No. OCTOBER 2020 CITY OF GO HOSPITA	pitality Fee Div	rision, P.O. Drawer ue Date OV. 20, 2020	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$ Penalty \$

(Failure to pay on time carries a 5% per month penalty and fines up to \$500)

Signature_

Remit payment to: City of Goose Creek, Hospitality Fee Division, P.O. Drawer 1768, Goose Creek, South Carolina 29445

Voucher No. 11	Voucher No. NOVEMBER 2020		ue Date DEC. 20, 2020	Gross Proceeds From the Meals, Food and Beverages
Due Date DEC. 20, 2020	CITY OF GO	OOSE CR	EEK	\$
Observice No.	HOSPITA	ALITY I	FEE	Multiply sales by 2% \$
Check No.	Customer #			Penalty \$
Date Paid	Business Name:			TOTAL DUE \$
Amount	Contact Name: Mailing Address: City:	State:	Zip	This coupon must accompany payment of Fees for proper credit.
\$	Property Address:			Make checks payable to: City of Goose Creek
	Failure to pay on time ca			up to \$500) 1768, Goose Creek, South Carolina 29445
Remit payr	(Failure to pay on time ca	spitality Fee Div	vision, P.O. Drawer	1768, Goose Creek, South Carolina 29445 Gross Proceeds
Remit payr	Voucher No. DECEMBER 2020 CITY OF GO	spitality Fee Div	vision, P.O. Drawer ue Date AN. 20, 2021	1768, Goose Creek, South Carolina 29445
Remit payr Voucher No. 12 Due Date	(Failure to pay on time ca	spitality Fee Div	vision, P.O. Drawer ue Date AN. 20, 2021	Gross Proceeds From the Meals, Food and Beverages
Remit payr Voucher No. 12 Due Date JAN. 20, 2021	Voucher No. DECEMBER 2020 CITY OF GO	spitality Fee Div	vision, P.O. Drawer ue Date AN. 20, 2021	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$ Penalty \$
Remit payr Voucher No. 12 Due Date JAN. 20, 2021	Voucher No. DECEMBER 2020 CITY OF GO HOSPITA	spitality Fee Div	vision, P.O. Drawer ue Date AN. 20, 2021	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$
Remit payr Voucher No. 12 Due Date JAN. 20, 2021 Check No.	Voucher No. DECEMBER 2020 CITY OF GO HOSPITA	spitality Fee Div	vision, P.O. Drawer ue Date AN. 20, 2021	Gross Proceeds From the Meals, Food and Beverages \$ Multiply sales by 2% \$ Penalty \$

Remit payment to: City of Goose Creek, Hospitality Fee Division, P.O. Drawer 1768, Goose Creek, South Carolina 29445

(Failure to pay on time carries a 5% per month penalty and fines up to \$500)

Signature_