

**TAX RETURN  
PLACES FOR EATING TAX**

**Village of Matteson  
4900 Village Commons  
Matteson, IL 60443  
(708) 283-4900**

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Business Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Reporting Period: \_\_\_\_\_

FEIN: \_\_\_\_\_ IL Sales Tax #: \_\_\_\_\_

Taxes must be paid by the 20th day of the month following the reporting period (normally every month, unless you are filing Sales Tax Returns with the State of Illinois on a quarterly or annual basis.)

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|----|---|----------|
| 1. | Gross Sales (should agree with IL ST-1, Line 3)         | \$ _____ |
| 2. | Deductions of Sales Not Subject to Tax (T-shirts, etc.) | \$ _____ |
| 3. | Taxable Sales (Line 1 minus Line 2)                     | \$ _____ |
| 4. | Amount of Tax (Multiply Line 3 by 1% (.01))             | \$ _____ |

Please make checks payable to the “**Village of Matteson**” and mail your return with the tax payment to the “**Village of Matteson, Attn: Places for Eating Tax**”, at the address listed above.

Under penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this form is true, correct, and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name & Title

\_\_\_\_\_  
Phone Number