



**CITY OF DAHLONEGA**

465 Riley Road

Dahlonega, Georgia 30533

Phone: 706-482-2706 • Fax: 706-864-4837

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

Physical Address: \_\_\_\_\_

Sales Report for the Months of:

\_\_\_\_\_

<b>MONTH</b>	<b>FOOD SALES</b>	<b>BEER/WINE SALES</b>	<b>FOOD AND OTHER SALES</b>

I certify that this report including accompanying Georgia Sales Tax Returns have been examined by me and are, to the best of my knowledge and belief, a true and complete report for the months stated.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Signature

Attach copies of Georgia Sales Tax Returns for the months reported above.