



City of Hannibal Office of City Clerk

320 Broadway • Hannibal, MO 63401
Phone: 573-221-0111 • Fax: 573-221-8191

AFFIDAVIT OF GROSS RECEIPTS

Business Name: _____ Business License Number: _____ Rec'd on File: _____

City of Hannibal
State of Missouri

_____, being duly sworn his oath, says that the gross
(Name of Authorized Person)

Amount received by _____, during the license year ending
(Name of Business)

on the 30th day of June 20, _____

From or through its business location or occupation at _____
(Address of Business)

, has been \$ _____ (which is the total gross sales and/or services, excluding tax, from Schedule below.)

Schedule of Gross Receipts (Must be reported monthly)

July	\$ _____	January	\$ _____
August	\$ _____	February	\$ _____
September	\$ _____	March	\$ _____
October	\$ _____	April	\$ _____
November	\$ _____	May	\$ _____
December	\$ _____	June	\$ _____

Not valid unless signed here _____

Kindly fill out and execute this affidavit of gross sales and return to City Clerk, no later than July 31, so the amount due from you can be computed for the past year to comply with General Ordinance #2979. If not completed and returned by July 31, an official complaint will be filed in the City of Hannibal Municipal Court.

Subscribed and sworn to before me this _____ Day of _____, 20 _____

Notary Public

My commission expires _____