



## County of Mono Cannabis Business Tax Cultivation - Annual Return

Business Name:

Permit No:

Business Address:

City:

Zip Code:

Business Phone:

Tax Period: Select Reported Quarters Below

Tax Year:

Due Date:

1st (Jan - Mar)

2nd (Apr - Jun)

3rd (Jul - Sep)

4th (Oct - Dec)

**Payments must be received in our office by the Due Date to be accepted as timely.  
Postmarks or other indications of submittal are not accepted.**

1st Quarter Total Tax Reported:

2nd Quarter Total Tax Reported:

3rd Quarter Total Tax Reported:

4th Quarter Total Tax Reported:

**Quarterly Subtotal, Tax Due:**

Date Paid:

Number of Months Late:

mm/dd/yyyy

If payment is received after the due date, penalties and interest must be calculated and remitted.

**Penalty 1: 10% of Tax Due**, if received late.

**Interest 1: 1% on Tax Due**, if received late.

**Penalty 2: 25% of Tax Due**,

if received on or after the 1st day of the second month late.

**Interest 2: 1% on Tax and Penalties Due**, if received on or after the 1st

day of the second month late and on the 1st day of every subsequent month.

**Subtotal, Penalties & Interest:**

**Total Tax, Penalties & Interest Due - Pay This Amount:**

Make Check Payable to: Mono County Treasurer - Tax Collector  
Mail - Submit Form and Payment to: PO Box 495 Bridgeport, CA 93517  
In Person - Submit Form and Payment to: 25 Bryant St. Bridgeport, CA 93517

I declare under penalty of perjury that the above is true and correct to the best of my knowledge.

Signature:

Date:

Printed Name:

Contact Phone Number: