COUNTY OF YOLO CANNABIS TAX QUARTERLY RETURN



Mail Payment to: County of Yolo Department of Financial Services PO BOX 1995 Woodland, CA 95776-1995

Business Name and Address:			Permit Number:	
	Start Date:		End Date:	
Cultivation	Activities			
1	Gross Cultivation Receipts: Enter the total receipts collected in this reporting period.			
2	Cultivation Tax Amount Due: (4% of line 1)			
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	ation Activities			T
3	Gross Manufacturing Receipts			
4	Gross Processing Receipts			
5	Gross Distribution Receipts			
6	Other Cannabis Receipts Total Non Cultivation Receipts (Add Line 2.4. E. 9. 6)			
7	Total Non-Cultivation Receipts (Add Line 3, 4, 5, & 6) Non Cultivation Tax Amount Due: (F% of line 7)			
8	Non-Cultivation Tax Amount Due: (5% of line 7)			
9	Total Amount of Cannabis Gross Receipts Tax (Add line 2 & 8)			
10	Penalties: Reference Section 3-7.10 of the County Ordinance			
11	Interest: Reference Section 3-7.10 of the County Ordinance			
12	Total Penalties and Interest (Add Line 1	0 & 11)		
TOTAL AN	10UNT DUE (Add line 9 & 12 - All Payment	must be rem	itted in full)	
Certification I certify unde	: er penalty of perjury that the foregoing is true and	d correct.		
Printed Nam	e:		Date:	
			NOTIO	CE:
Signature:			The tax will be delinquent if not paid on or before the last day of the month in which due.	
Title:			A penalty of 10% will be added after delinquent date and	
Owner, Partner, Agent or Officer			plus interest of 1.5% per month, or fraction thereof on the amount of tax.	
			Due Dates:	
Appointments: www.yolocounty.org/cannabistax			1st Quarter – October 31st 2nd Quarter – January 31st	
Questions: taxinfo@yolocounty.org			3rd Quarter – April 3	•
			4th Quarter – July 31st	