



VILLAGE OF BOLINGBROOK RAFFLE DEVICE TAX REMITTANCE FORM

Date _____

Bolingbrook Business Name _____

Bolingbrook Business Address _____

Corporate Name _____

Remittance Month/Year _____

Gross Sales \$ _____

Tax Rate
Five percent (5%) of raffle revenues
up to the first ten thousand dollars (\$10,000)
of total monthly raffle revenues \$ _____

Seven and one-half percent (7.5%) of the
raffle revenues for the total monthly raffle
revenues which are between ten thousand one
dollars (\$10,001) and fifteen thousand dollars (\$15,000); or \$ _____

Ten percent (10%) of the raffle revenues
for the total monthly raffle revenues which
are in excess of fifteen thousand one dollars (\$15,001). \$ _____

Late Fee (5% after the 10th of the month) \$ _____

Late Penalty (5% per month) \$ _____

Prepared By (Print Name) _____

Contact phone or email _____

PLEASE RETURN THE COMPLETED FORM AND PAYMENT TO:

Village of Bolingbrook
Finance Director's Office
375 W. Briarcliff Road
Bolingbrook, IL 60440
Attn: Raffle Device Tax Remittance

ONLINE PAYMENTS ACCEPTED BY VISITING:
<https://bolingbrookil.portal.opengov.com/categories/1086>

The monthly tax return shall be filed with the Finance Department Director's Office by the tenth (10) day of the month for the preceding month's receipts. Penalties for late filing will be imposed according to the Village of Bolingbrook Ordinance 09-003, Section 8-2405.