

**CITY OF DECATUR**  
**Multiple Location Reporting**  
**Food and Beverage Tax**

**Business Name**

**IBT #**

Location Address

Total Gross Receipts  
from Food & Beverage

\$  
\$  
\$  
\$  
\$  
\$

Total

\* \$

**\*Transfer total to line 1 of the Food and Beverage Tax Return.**

If combining multiple locations on the City of Decatur Food and Beverage Tax Return,  
**you must also include this form.**