



**St. Louis County Department of Revenue – Division of Licenses**  
 41 S. Central Avenue, Clayton, MO 63105 – Ph: 314. 615.4217, Fax: 314. 615.5125  
[Licensing@stlouiscountymo.gov](mailto:Licensing@stlouiscountymo.gov)

**Monthly Gross Receipt Report**  
**Reported to the St. Louis County, Missouri, Director of Revenue**  
**in accordance with Chapter 502 SLCRO**

**Company Name** \_\_\_\_\_

**Company Address** \_\_\_\_\_

**Corporate Address (if applicable)** \_\_\_\_\_

**Reporting Officer Name and Title** \_\_\_\_\_

**Month Reported** \_\_\_\_\_, **20** \_\_\_\_\_

Gross Receipts derived from sales within unincorporated St. Louis County \$ \_\_\_\_\_

Exemptions as provided by Ordinance 502 SLCRO \$ \_\_\_\_\_

**Total Gross Receipts minus exemptions as provided by the ordinance** \$ \_\_\_\_\_

**Five (5) percent of the amount shown on line above** \$ \_\_\_\_\_

I certify that the calculations above accurately represent five percent (5%) of the sum of the gross receipts (minus exemptions), which is the amount due St. Louis County for the company’s occupation tax for the month being reported.

**MUST BE SIGNED IN FRONT OF A NOTARY PUBLIC**

STATE OF MISSOURI

COUNTY OF \_\_\_\_\_ }

\_\_\_\_\_, upon oath states that he/she and is authorized to report on behalf of the company \_\_\_\_\_ and that the statements in this report are true and correct.

\_\_\_\_\_  
**Printed Name and Title** **Signature**

Subscribed and sworn before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

My commission expires \_\_\_\_\_

\_\_\_\_\_  
**Notary Public**