



Village of Pingree Grove Prepared Foods Tax Return	FILING PERIOD	
	FROM	TO

IBT#	_____	Taxpayer's Telephone:	_____
Name	_____	Preparer's Telephone:	_____
Address	_____ _____		

STEP ONE: Calculate Your Tax on Customer Purchases of:

- | | | |
|----|--|-------|
| 1) | Food & Beverage, Exclusive of Tax | _____ |
| 2) | Tax Due on Receipts (Multiply Line 1 by 2 Percent) | _____ |

STEP TWO: : Calculate Your Penalty, Interest & Other Adjustments
If You Are Filing After the Due Date, Complete Lines 5 and 6

- | | | |
|----|--|-------|
| 3) | Add Interest (Multiply Line 2 by 2% per month) | _____ |
| 4) | Excess Tax Collected (Add Lines 2, 3, & 4) | _____ |
| 5) | TOTAL PAYMENT DUE: | _____ |

Make Check Payable to "Village of Pingree Grove" &
Send To:
Village of Pingree Grove / Finance Department
555 Reinking Road
Pingree Grove, IL 60140

A copy of your Illinois Form ST-1 "Sales & Use Tax Return"
for this same reporting period **MUST** be attached to this
return.

Under penalty as provided for by law, I declare that I have examined this return and to the best of my knowledge and
belief it is true and correct. I have attached hereto a copy of Illinois Form ST-1 "Sales & Use Tax Return" for this same period.

_____ Preparer	_____ Date	_____ Taxpayer	_____ Date
_____ Preparer Printed Name		_____ Taxpayer Printed Name	

OFFICE USE ONLY

Date Received:	_____	Final Return, Discontinued Date:	_____
Postmark Date:	_____	Final Return, Business Sold Date:	_____
Cash/Check #	_____	First & Final Return:	_____
Finance Div.	_____		