



## QUARTERLY PROTECT AND SERVE CHARGE RETURN FORM

**Due on or before January 20, April 20, July 20, and October 20**

Business Name and Address:

Venue Name:

Venue Address:

Quarter Ending:

Contact Name and Email Address:

Report Submission Date:

Prepared By:

Month	Aggregate Number of Admissions	Gross Receipts from Admissions	Fee Rate per Admission	Total Due
Quarter Total:				



## QUARTERLY PROTECT AND SERVE CHARGE RETURN FORM

### Certification

I certify that the information provided in this report is complete, true and accurate, and that all Protect and Serve Charges collected have been or will be remitted to Anderson Township in accordance with ORC 503.54.

Signature:

Name:

Title:

Date:

Remit Payment and Form to: Anderson Township  
Attn: Finance Department  
7850 Five Mile Road  
Anderson Township, OH 45230

**Protect and Serve Charges that are not timely paid to Anderson Township shall accrue interest at the rate of ten percent (10%) per annum until paid in full.**