



CITY OF HARVEY
 MAYOR CHRISTOPHER J. CLARK
 Department of Revenue
 15320 Broadway Avenue
 Harvey, IL 60426
 Phone: 708-210-5315
revenue@citofharveyil.gov

**Video Gaming Terminal Push Tax
 Terminal Operator Push Tax Return**

Ordinance No.3394

(A). Push Tax. Except as otherwise provided by this chapter, an amusement tax is imposed upon any person who participates in the play of a video gaming terminal that takes place within the jurisdictional boundaries of the city of Harvey. The rate of the tax shall be equal to one cent (\$0.01) per play on a video gaming terminal. The terminal operator of a video gaming terminal may separately itemize and charge each person who plays a video gaming terminal.

(B). Tax Additional. The tax imposed in this chapter is in addition to all other taxes.

REQUIRED: Attach a detailed breakdown which includes number of machines and locations of machines within Harvey, including the number of push plays for each registered video gaming terminal.

 Operator Name EIN _____

Please mark (X) on the appropriate month(s) for payment: _____ Year

___ January ___ April ___ July ___
 October

___ February ___ May ___ August ___ November

___ March ___ June ___ September ___

December

1. Total number of push plays per period _____
2. Tax Rate Per Push \$ **\$0.01**
3. Tax Due (Line 1 multiplied by Line 2)
 \$ _____
4. Interest (if late, payment is 1.5% multiplied by Line 3) (see (a))
 \$ _____
5. **TOTAL AMOUNT DUE** (Line 3 plus Line 4) \$ _____
6. **Check Surcharge (Line 5 x 2%)** \$ _____

(a) If a terminal operator fails to pay to the City the tax imposed by the due date (20th of the month following the tax collection month), interest shall accumulate at a rate of 1.5% per month until paid. If the 20th falls on a holiday or weekend, the next City business day shall be the due date for purposes of assessing interest charges.

Under the penalties of perjury and other penalties provided by law, I declare that I have examined this return and to the best of my knowledge and belief, it contains information that is true correct and complete. I further certify that the information reported herein is taken from the books and records of the business for which this return is filed.

Signature of Preparer: _____ Date: _____

Preparer Phone: _____ Preparer Email: _____

Please make checks payable to the **City of Harvey-Dept of Revenue. Memo: Push Tax**
Completed returns and payments may be mailed to:

City of Harvey
Attn: Department of Revenue - Push Tax
15320 Broadway Avenue
Harvey, IL 60426