Jose	Cisneros
	TDEVCIIDED

VI	TYOFSAT				
Busin	ess Account Number:				
Opera	tor Name:				
Period	l Covered (Month/Year):				
	O MUIDATS - TS	PERATOR ADMISSION TAX M	ONTLY STATEMENT		
		DUE DATE - 6TH DAY OF THE FOLLOWING			
		ue date falls on a weekend or holiday, due date is the r			
1.	Number of Complimentary Tickets Issued				
2.	Number of Tax-Exempt Tickets	s Sold			
3.	Number of Tickets Sold (price/				
4.	Tax Due (\$0.25 x line 3)	\$			
5.	Number of Tickets Sold (price/	value between \$2.02 and \$25.01)			
6.	Tax Due (\$0.75 x line 5)	\$			
7.	Number of Tickets Sold (price/	value between \$25.02 and \$25.49)			
8.	3. Tax Due (\$1.75 x line 7)		\$		
9.					
10.	0. Tax Due (\$2.25 x line 9)		\$		
11.	Add Lines 4, 6, 8, and 10		\$		
		12. Late Filing Penalty	\$		
	Additional Charges if	13. Late Payment Penalty	\$		
	Delinquent: sftreasurer.org/penalties	14. Interest	\$		
	<u> stricasarci.org/penarties</u>	15. Administrative Fee if delinquent	\$		
16.	Total Amount Due (Add lines 1	·	\$		
l ce	ertify under penalty of perjury th	nat I am the operator (including an officer	general partner, member manager, executor, an agent of the operator authorized to sign this		
forr the Ope the of t for	m on behalf of the operator purson on Business Form Central, then erator Admission Tax Statement best of my knowledge and belief, he San Francisco Business and Tofinancial information pursuant to	uant to a validly executed Power of Attorney on Power of Attorney Declaration – Form PO including any accompanying schedules or true and correct, and fully compliant with a ex Regulations Code. I acknowledge that I ar	y (go to www.sftreasurer.org, click on Business, A-1), and I have examined the foregoing Stadium worksheets, and the information thereon is, to all the requirements provided in Articles 6 and 11 m providing information in response to a requestess and Tax Regulations Code. I am required by		
SIG	ATURE: NAME AND TITLE:				
DA	ΓΕ:(MM/DD/YYYY)	COMPANY:			
EM	AIL:	TELEPHONE:			

Revised 06/26/2024