Print Form

City of Englewood, Colorado

REMITTANCE COPY

Transaction Fee Report

For the **Month** of **Year**: Account No**:**

Date	No. of Transactions	Date	No. of Transactions
1		17	
2		18	
3		19	
4		20	
5		21	
6		22	
7		23	
8		24	
9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16		TOTAL	_____X **$0.30**=_____

Due the 20th day following the month of transaction

Signed: _____Date_____

Title: _____

Phone:_____

.....✂....Please Cut Here..... ✂.....Please Cut Here..... ✂.....

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9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16		TOTAL	_____X **$0.30**=_____