



# **ZANZIBAR REVENUE BOARD**

## **STATEMENT FOR 18% TOUR OPERATOR LEVY**

(To be Submitted by all Tours and other establishments providing tourist services along with monthly payment)

To **The Commissioner**  
**Zanzibar Revenue Board**  
**Zanzibar**

From : .....  
 Tel. No: .....  
 Reg. No. Z.....  
 For the Month .....

Date	<i>AMOUNT RECEIVED FOR SERVICES</i>		<i>TOTAL</i>
	<i>TRANSPORT</i>	<i>OTHER SERVICES</i>	
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
<i>TOTAL.</i>			

*OUR OPERATOR (18%) PAYABLE FOREIGN CURRENCY/T.SHILLING*

PLEASE FIND ENCLOSED CASH/CHEQUE FOR THE ABOVE AMOUNT TOWARDS PAYMENT OF TOUR LEVY FOR THE MONTH OF ..... CERTIFY THAT THE PARTICULARS CONTAINED HEREIN ARE TRUE AND THE RECEIPTS MENTIONED ABOVE ARE GROSS AMOUNTS WITHOUT MAKING ANY DEDUCTIONS.

Date: .....

Sig. of the Manager/Owner .....