



HOTEL/MOTEL TRANSIENT OCCUPANCY TAX WAIVER
EXEMPTION CLAIM FOR GOVERNMENT AGENCIES

Name

Title

Hotel/Motel

Location

Arrival Date

Departure Date

This is to certify that I, the undersigned, am a representative or employee of the Desert Community College District. The District is an agency of the State of California. The charges for the occupancy at the above establishment on the dates set forth have been, or will be paid for by such governmental agency, and such charges are incurred in the performance of my official duties as a representative or employee of the above-noted governmental agency.

I hereby declare under penalty of perjury that the forgoing statements are correct.

Signature of Employee

Date

INSTRUCTIONS TO EMPLOYEE:

Please complete this form and present to the hotel/motel at the time of registration or reservation.

INSTRUCTIONS TO HOTEL/MOTEL:

Please retain this for your files in order To substantiate your tax report.