



City of Clay, Alabama

**DEPARTMENT OF REVENUE**

**AFFIDAVIT REGARDING ANNUAL GROSS RECEIPTS**

For Renewal Year: \_\_\_\_\_

I, \_\_\_\_\_ (name), for myself and/or for the business operated under the  
trade name of \_\_\_\_\_ (business name), located  
at \_\_\_\_\_ (business address), hereby

Certify under oath that I estimate the gross receipts (as gross receipts are defined in the City of  
Clay Ordinance 2010-08) of said business for the previous calendar year of 20\_\_\_\_ as  
\$\_\_\_\_\_.

If not in operation for the full calendar year (January-December), period covered is  
\_\_\_\_\_ to \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date