

APPLICATION FOR TAX REFUND MUD # _____

In order to apply for a tax refund, a copy, front and back, of your cancelled check, a complete disbursement listing/voucher must be provided, along with the following information:

Name on tax roll: _____ Legal Description: _____
Address: _____ Account Number: _____
City: _____ State: _____ Zip Code: _____

Mortgage Company and /or Tax Service: _____

Refund is to be made payable to: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone Number: _____

Tax Year(s) of Refund Requested: _____ Amount of Refund: _____

Reason for Requesting Refund: _____ Overpayment _____ Duplicate payment

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct to the best of my knowledge and belief."

Any person who makes a false entry upon the foregoing record shall be subject to one of the following penalties: 1. Imprisonment of not more than 10 years nor less than 2 years and /or a fine of not more than \$5000 or both such fine and imprisonment; 2. Confinement in jail for a term up to 1 year or a fine not to exceed \$2,000 or both such fine and imprisonment as set forth in SECTION 37.10, PENAL CODE.

Signature

Date of application for tax refund

Action by Board of Directors: Approved: _____ Disapproved: _____ Date: _____

Jeannie Manning
Tax Assessor/Collector

The refund requested has been determined to be the result of an excessive or erroneous payment

Sandy Treon
Accounting Mgr/Auditor

Jeannie Manning
Tax Assessor/Collector