



Camden County, GA

200 East 4th Street,
Courthouse Square
P.O. Box 99
Woodbine, Georgia 31569

Master

File Number: 10-0224

File ID: 10-0224

Type: Regular Agenda

Status: Agenda Ready

Version: 1

In Control: Board of County
Commissions

File Created: 04/21/2010

File Name: Approval for Chair to execute Tax Release
Applications.

Final Action:

Title: Approval for Chair to execute Tax Release Applications.

Attachments: Tax Apps.04.27.2010.pdf, Tax
Apps.Contd.04.27.2010.pdf

Agenda Date: 04/27/2010

Contact: Beth Soles 576-3248 / Norman Covert 576-3241

Effective Date: 04/27/2010

Text of Legislative File 10-0224

Title

Approval for Chair to execute Tax Release Applications.

Motions

Approve this item as presented by staff.

Other Action as deemed necessary by the Board.

Background

| <u>Name</u> | <u>Digest Year</u> | <u>Bill No.</u> | <u>Amount</u> |
|---------------------------------|--------------------|-----------------|---------------|
| Melody & Weston Whitten | 2008 | 1179A54 | \$42.76 |
| Melody & Weston Whitten | 2008 | ABP8281 | \$61.24 |
| Cheryl Dunlap & William Spencer | 2007 | BGQ5662 | \$107.28 |
| Cheryl Dunlap & William Spencer | 2008 | BGQ5662 | \$97.26 |
| St. Marys Downtown Development | 2009 | 26012 | \$1,925.16 |
| Theodore Bennett | 2010 | M149 | \$66.34 |
| Theodore Bennett | 2009 | M143 | \$73.56 |
| Barbara Spradley | 2010 | 2449 | \$17.48 |
| Barbara Spradley | 2009 | 2429 | \$17.48 |
| Barbara Spradley | 2008 | 2415 | \$26.07 |

The above Tax Release Applications have been approved by the Tax Commissioner & the Board of Assessors.

Staff Recommendation

Approval of this item as presented by staff.

| | | | |
|---|--|--|-------------------------------|
| TAXPAYER NAME <i>Weston L & Melody A. Whitten</i> | | <input type="checkbox"/> REQUEST FOR TAX CREDIT <input checked="" type="checkbox"/> REQUEST FOR REFUND | |
| ADDRESS <i>48 Cooner Road</i> | | DIGEST YEAR <i>2008</i> | BILL NUMBER <i>1179A54</i> |
| <i>Kingsland Ga 31648</i> | | DUE DATE <i>11-17-08</i> | DATE PAID <i>4-24-09</i> |
| DESCRIPTION OF PROPERTY <i>2003 Nissan IN6ED29X23C426293</i> | | TAX AMOUNT DUE <i>144.34</i> | AMOUNT PAID <i>187.11</i> |

I hereby request a (credit/refund) for State, County and School Taxes in the amount of \$ 42.76 illegally or erroneously assessed against me. My claim is based upon the following facts:
Owners lives in county not city of Kingsland as was charged in error.

I DO DO NOT request a hearing before the county Governing Authority concerning this claim.

TAXPAYER'S SIGNATURE *Melody Whitten* DATE *12-8-09*

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Tax Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

| | | |
|--|---|------------------------|
| TAX COLLECTOR/COMMISSIONER <i>[Signature]</i> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE <i>4-16-10</i> |
|--|---|------------------------|

COMMENTS:

| | | |
|------------------------|--|------|
| BOARD OF TAX ASSESSORS | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
|------------------------|--|------|

COMMENTS:

| | | |
|--|--|------|
| COUNTY GOVERNING AUTHORITY <i>X</i> | <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED | DATE |
|--|--|------|

COMMENTS

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | | | |
| TAX: State | <i>122</i> | <i>0</i> | <i>122</i> |
| County M&O | <i>58.31</i> | <i>0</i> | <i>58.31</i> |
| County Bond | | | |
| School M&O | <i>41.62</i> | <i>0</i> | <i>41.62</i> |
| School Bond | | | |
| <i>City</i> | <i>47.82</i> | <i>0</i> | <i>47.82</i> |
| <i>---</i> | <i>171</i> | <i>0</i> | <i>171</i> |
| TOTAL | <i>187.11</i> | <i>0</i> | <i>187.11</i> |

TAX RELEASE APPLICATION

NUMBER

| | | | |
|--|--|--|---------------------------------|
| TAXPAYER NAME <i>Weston L & Melody Whitten</i> | | <input type="checkbox"/> REQUEST FOR TAX CREDIT <input checked="" type="checkbox"/> REQUEST FOR REFUND | |
| ADDRESS <i>42 Cooney Road</i> | | DIGEST YEAR <i>2008</i> | BILL NUMBER <i>ABP8281</i> |
| <i>Kingsland Ga 31548</i> | | DUE DATE <i>11-11-08</i> | TAX AMOUNT DUE <i>206.71</i> |
| DESCRIPTION OF PROPERTY <i>2006 GMC Envoy 1GKES16S366150337</i> | | DATE PAID <i>7-24-09</i> | AMOUNT PAID <i>267.96</i> |

I hereby request a (credit/refund) for State, County and School Taxes in the amount of \$ *164.29* illegally or erroneously assessed against me. My claim is based upon the following facts:
Owners live in county, not city of Kingsland as charged in error.

I DO DO NOT request a hearing before the county Governing Authority concerning this claim.

TAXPAYER'S SIGNATURE *Melody Whitten* DATE *12-8-09*

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Tax Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

| | | |
|--|---|------------------------|
| DISPOSITION | | |
| TAX COLLECTOR/COMMISSIONER <i>[Signature]</i> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE <i>9-16-10</i> |

COMMENTS:

| | | |
|------------------------|--|------|
| BOARD OF TAX ASSESSORS | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
|------------------------|--|------|

COMMENTS:

| | | |
|----------------------------|--|------|
| COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED | DATE |
|----------------------------|--|------|

COMMENTS:

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | | | |
| TAX: State | <i>102.00</i> | <i>0</i> | <i>102.00</i> |
| County M&O | <i>52.29</i> | <i>0</i> | <i>52.29</i> |
| County Bond | | | |
| School M&O | <i>50.00</i> | <i>0</i> | <i>50.00</i> |
| School Bond | | | |
| | <i>204.29</i> | <i>50.00</i> | <i>154.29</i> |
| | | <i>164.29</i> | <i>206.71</i> |
| TOTAL | | <i>164.29</i> | <i>206.71</i> |

TAXPAYER NAME William H Spencer/Cheryl A Dunlap REQUEST FOR TAX CREDIT REQUEST FOR REFUND

ADDRESS 17325 15 Hwy 17 DIGEST YEAR 2007 BILL NUMBER B605662 TAX AMOUNT DUE 241.76

Woodbine Ga 31569 DUE DATE 8-24-07 DATE PAID 6-2-09 AMOUNT PAID 349.03

DESCRIPTION OF PROPERTY
1995 Chev. Motorhome 1GBLP37N753306971

I hereby request a (credit/refund) for State, County and School Taxes in the amount of \$ 107.28 illegally or erroneously assessed against me. My claim is based upon the following facts:
1995 Chev. Motorhome 1GBLP37N753306971 taxed in wrong district. (43 instead of 3)

I DO DO NOT request a hearing before the county Governing Authority concerning this claim.

TAXPAYER'S SIGNATURE William H Spencer DATE 3-08-10

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Tax Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

TAX COLLECTOR/COMMISSIONER Lee Williams AGREES DISAGREES DATE 4-16-10

COMMENTS:

BOARD OF TAX ASSESSORS AGREES DISAGREES DATE

COMMENTS:

COUNTY GOVERNING AUTHORITY GRANTED DENIED DATE

COMMENTS

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | | | |
| TAX: State | 2.04 | | 2.04 |
| County M & O | 97.68 | | 97.68 |
| County Bond <u>City</u> | 93.53 | 93.53 | 0 |
| School M & O | 120.07 | | 120.07 |
| School Bond | | | |
| <u>Sve Dist</u> | 3.99 | 3.99 | 0 |
| <u>Int</u> | 31.94 | 9.76 | 21.98 |
| TOTAL | 349.05 | 107.28 | 241.77 |

| | | | |
|--|--|---|--------------------------|
| TAXPAYER NAME William H Spencer / Cheryl A Dunlap | | REQUEST FOR TAX CREDIT <input checked="" type="checkbox"/> REQUEST FOR REFUND | |
| ADDRESS 17385 US Hwy 17 Woodbine Ga 31569 | | DIGEST YEAR 2008 | BILL NUMBER B5057662 |
| DESCRIPTION OF PROPERTY 1995 Chev Motorhome 1BBLP37N7S3306971 | | DUE DATE 8-2-08 | TAX AMOUNT DUE 219.19 |
| | | DATE PAID 6-2-09 | AMOUNT PAID 316.44 |

I hereby request a (credit/refund) for State, County and School Taxes in the amount of \$ 97.26 illegally or erroneously assessed against me. My claim is based upon the following facts:
1995 motorhome taxed in wrong district (should have been district 43 not 3)

I DO DO NOT request a hearing before the county Governing Authority concerning this claim.

TAXPAYER'S SIGNATURE William Spencer DATE 3-08-10

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Tax Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

| DISPOSITION | | |
|---|---|---------------------|
| TAX COLLECTOR/COMMISSIONER X <u>Don Williams</u> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE <u>4-16-10</u> |
| COMMENTS: | | |

| | | |
|------------------------|--|------|
| BOARD OF TAX ASSESSORS | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS: | | |

| | | |
|---------------------------------|--|------|
| COUNTY GOVERNING AUTHORITY X | <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|----------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | | | |
| TAX: State | 1.84 | 0 | 1.84 |
| County M & O | 88.56 | 0 | 88.56 |
| County Bond | | | |
| School M & O | 108.85 | 0 | 108.85 |
| School Bond Sve Dist | 3.62 | 3.62 | 0 |
| City | 84.80 | 84.80 | 0 |
| Int | 28.77 | 8.84 | 19.93 |
| TOTAL | 316.44 | 97.26 | 219.18 |

| | | | |
|---|---|-----------------------------|--|
| TAXPAYER NAME ST MARYS DOWNTOWN DEVELOP. | <input type="checkbox"/> REQUEST FOR TAX CREDIT | | <input checked="" type="checkbox"/> REQUEST FOR REFUND |
| | Digest Year 2009 | Bill Number 26012 | Tax Amount Due \$1,925.16 |
| ADDRESS 418 OSBORNE RD | Due Date 1/15/2010 | Date Paid | Amount Paid |
| | ST MARYS GA 31558 | | |
| DESCRIPTION OF PROPERTY V/L PORTION OF UNOPENED NORRIS | | | |

APR 08 2010
KN

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 1,925.16 illegally or erroneously assessed against me. My claim is based upon the following facts.

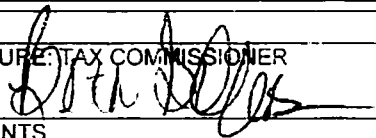
EXEMPT PROPERTY-OWNED BY CITY OF ST MARYS

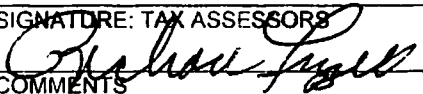
I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

| | | |
|---|---|------------------|
| SIGNATURE: TAX COMMISSIONER  | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE 4/5/2010 |
| COMMENTS | | |

| | | |
|---|--|------|
| SIGNATURE: TAX ASSESSORS  | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | | |
|---------------------------------------|--|------|
| SIGNATURE: COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 72,103 | 71,103 | 0 |
| TAX: State | 18.03 | 18.03 | |
| County M&O | 843.61 | 843.61 | |
| County Bond | | | |
| School M&O | 1,063.52 | 1,063.52 | |
| School Bond | | | |
| TOTAL | \$1,925.16 | \$1,925.16 | 0 |

| | | | |
|--|---|-----------------------------|---|
| TAXPAYER NAME BENNETT THEODORE A | <input type="checkbox"/> REQUEST FOR TAX CREDIT | | <input type="checkbox"/> REQUEST FOR REFUND |
| | Digest Year 2010 | Bill Number M 149 | Tax Amount Due \$66.34 |
| ADDRESS 5001 E THRIFT ST | Due Date 5/1/2010 | Date Paid | Amount Paid 0 |
| KINGSLAND GA 31548 | BY: <i>KV</i> 4/8 2010 | | |
| DESCRIPTION OF PROPERTY 1982 SHOWCASE SHSWG07820392 | | | |

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 66.34 illegally or erroneously assessed against me. My claim is based upon the following facts.

MOBILE HOME BURNT DOWN

I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

SIGNATURE: TAX COMMISSIONER *Roth Jones* [X] AGREES [] DISAGREES DATE 4/5/2010

COMMENTS

SIGNATURE: TAX ASSESSORS *Richard Byrd* [] AGREES [] DISAGREES DATE

COMMENTS

SIGNATURE: COUNTY GOVERNING AUTHORITY [] AGREES [] DISAGREES DATE

COMMENTS

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 2379 | 2379 | 0 |
| TAX: State | .53 | .53 | |
| County M&O | 24.69 | 24.69 | |
| County Bond | | | |
| School M&O | 31.12 | 31.12 | |
| School Bond | | | |
| ADIMIN FEE | 10.00 | 10.00 | |
| TOTAL | \$66.34 | \$66.34 | 0 |

| | | |
|--|---|----------------------------------|
| TAXPAYER NAME BENNETT THEODORE A | <input type="checkbox"/> REQUEST FOR TAX CREDIT <input type="checkbox"/> REQUEST FOR REFUND | |
| | Digest Year 2009 | Bill Number M 143 |
| ADDRESS 5001 E THRIFT ST | Due Date 5/1/2009 | Tax Amount Due \$73.56 |
| KINGSLAND GA 31548 | Date Paid | Amount Paid |
| DESCRIPTION OF PROPERTY 1982 SHOWCASE SHSWGA07820392 | | |

RECEIVED
APR 08 2010
KH

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 73.56 illegally or erroneously assessed against me. My claim is based upon the following facts.

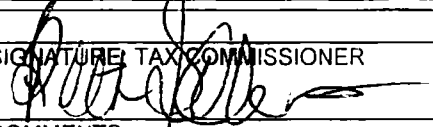
MOBILE HOME BURNT DOWN

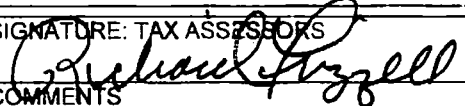
I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

| | | |
|---|---|-------------------------|
| SIGNATURE: TAX COMMISSIONER  | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE 4/5/2010 |
| COMMENTS | | |

| | | |
|---|--|------|
| SIGNATURE: TAX ASSESSORS  | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | | |
|---------------------------------------|--|------|
| SIGNATURE: COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 2380 | 2380 | 0 |
| TAX: State | .60 | .60 | |
| County M&O | 27.85 | 27.85 | |
| County Bond | | | |
| School M&O | 35.11 | 35.11 | |
| School Bond | | | |
| ADIMIN FEE | 10.00 | 10.00 | |
| TOTAL | \$73.56 | \$73.56 | 0 |

| | | |
|---|---|----------------------------------|
| TAXPAYER NAME SPRADLEY, BARBARA A | <input type="checkbox"/> REQUEST FOR TAX CREDIT <input type="checkbox"/> REQUEST FOR REFUND | |
| | Digest Year 2010 | Bill Number 2449 |
| | Due Date 5/1/2010 | Date Paid APR 08 2010 |
| ADDRESS 801 HENRY ST | | Tax Amount Due \$17.48 |
| BLACKSHEAR GA 31516 | | Amount Paid BY: KN |
| DESCRIPTION OF PROPERTY 1976 STATLER #10870 | | |

RECEIVED
APR 08 2010
BY: KN

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 17.48 illegally or erroneously assessed against me. My claim is based upon the following facts.

MOBILE HOME BURNT DOWN

I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

| | | |
|---|---|------------------|
| DISPOSITION | | |
| SIGNATURE: TAX COMMISSIONER <i>[Signature]</i> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE 4/5/2010 |
| COMMENTS | | |

| | | |
|--|--|------|
| SIGNATURE: TAX ASSESSORS <i>[Signature]</i> | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | | |
|---------------------------------------|--|------|
| SIGNATURE: COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 280 | 280 | 0 |
| TAX: State | .07 | .07 | |
| County M&O | 3.28 | 3.28 | |
| County Bond | | | |
| School M&O | 4.13 | 4.13 | |
| School Bond | | | |
| ADIMIN FEE | 10.00 | 10.00 | |
| TOTAL | \$17.48 | \$17.48 | 0 |

| | | | |
|---|---|----------------------------|--|
| TAXPAYER NAME SPRADLEY, BARBARA A | <input type="checkbox"/> REQUEST FOR TAX CREDIT | | <input checked="" type="checkbox"/> REQUEST FOR REFUND |
| | Digest Year 2009 | Bill Number 2429 | Tax Amount Due \$17.48 |
| ADDRESS 801 HENRY ST | Due Date 5/1/2009 | Date Paid | Amount Paid |
| | BLACKSHEAR GA 31516 | | |
| DESCRIPTION OF PROPERTY 1976 STATLER #10870 | | | |

RECEIVED
APR 08 2010
KII

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 17.48 illegally or erroneously assessed against me. My claim is based upon the following facts.

MOBILE HOME BURNT DOWN

I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

DISPOSITION

| | | |
|---|---|-------------------------|
| SIGNATURE: TAX COMMISSIONER <i>[Signature]</i> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE 4/5/2010 |
| COMMENTS | | |

| | | |
|--|--|------|
| SIGNATURE: TAX ASSESSORS <i>[Signature]</i> | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | | |
|---------------------------------------|--|------|
| SIGNATURE: COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 280 | 280 | 0 |
| TAX: State | .07 | .07 | |
| County M&O | 3.28 | 3.28 | |
| County Bond | | | |
| School M&O | 4.13 | 4.13 | |
| School Bond | | | |
| ADIMIN FEE | 10.00 | 10.00 | |
| TOTAL | \$17.48 | \$17.48 | 0 |

| | | | |
|---|---|----------------------------|---|
| TAXPAYER NAME SPRADLEY, BARBARA A | <input type="checkbox"/> REQUEST FOR TAX CREDIT | | <input type="checkbox"/> REQUEST FOR REFUND |
| | Digest Year 2008 | Bill Number 2415 | Tax Amount Due \$26.07 |
| ADDRESS 801 HENRY ST | Due Date 5/1/2008 | Date Paid | Amount Paid |
| | BLACKSHEAR GA 31516 | | |
| DESCRIPTION OF PROPERTY 1976 STATLER #10870 | | | |

RECEIVED
 APR 08 2010
 BY:

I hereby request (credit/refund) for State, County, and School Taxes in the amount of \$ 26.07 illegally or erroneously assessed against me. My claim is based upon the following facts.

MOBILE HOME BURNT DOWN

I DO DO NOT request a hearing before the county governing authority concerning this claim.

TAXPAYERS SIGNATURE _____ DATE _____

NOTE: Request for a tax credit must be filed before the date taxes become delinquent, otherwise taxes must be paid as charged and a refund requested. Disagreement by Tax Collector/Commissioner and/or Board of Assessors does not bar relief. The final authority to approve your request is vested with the County Governing Authority.

| DISPOSITION | | |
|---|---|-------------------------|
| SIGNATURE: TAX COMMISSIONER <i>[Signature]</i> | <input checked="" type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE 4/5/2010 |
| COMMENTS | | |

| | | |
|--|--|------|
| SIGNATURE: TAX ASSESSORS <i>[Signature]</i> | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | | |
|---------------------------------------|--|------|
| SIGNATURE: COUNTY GOVERNING AUTHORITY | <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES | DATE |
| COMMENTS | | |

| | ORIGINAL LIABILITY ON DIGEST | RELIEF GRANTED | REVISED LIABILITY |
|-------------------|------------------------------|----------------|-------------------|
| GROSS ASSESSMENT: | 592 | 592 | 0 |
| TAX: State | .15 | .15 | |
| County M&O | 7.14 | 7.14 | |
| County Bond | | | |
| School M&O | 8.78 | 8.78 | |
| School Bond | | | |
| ADIMIN FEE | 10.00 | 10.00 | |
| TOTAL | \$26.07 | \$26.07 | 0 |