

Hearing # \_\_\_\_\_

**AFFIDAVIT**

(one completed affidavit per attendee)

SA&I 451 (2014)

Title 68 § 2877 (E)2 & (E) 3

My name is \_\_\_\_\_. The information I will present today is true and correct to the best of my belief and knowledge.

\_\_\_\_\_, Taxpayer

\_\_\_\_\_, Taxpayer Representative

\_\_\_\_\_, County Assessor

\_\_\_\_\_, Deputy Assessor

\_\_\_\_\_, Other \_\_\_\_\_

\_\_\_\_\_

Date

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State of \_\_\_\_\_

County of \_\_\_\_\_

Signed or attested before me on \_\_\_\_\_, 20\_\_ by \_\_\_\_\_  
(Date) (Name of person)

My Commission expires: \_\_\_\_\_  
Notary

My Commission number: \_\_\_\_\_  
Title

SEAL