TOWN OF GEORGETOWN Office of the Treasurer

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REQUEST FOR TAX INFORMATION

Today's Date:	Taxpayer's Name: Telephone #:		
Real Estate Taxes on			for Calendar Year
(Property Address)			
\$	Date Paid:		
Motor Vehicle Excise Taxes on vehicles for Calendar Year (how many?)			
Year/Make	\$		Date Paid:
Year/Make	\$		Date Paid:
Year/Make	\$		Date Paid:
Year/Make	\$		Date Paid:
Year/Make	\$ <u></u>		Date Paid:
Year/Make	\$		Date Paid:
Please check one:			
□ Please call <u>(</u>)	_ when ready.	
□ Please email to	□ Please email to		
□ Please mail in the attached self addressed stamped envelope.			