



ASSIGNMENT OF RIGHTS
SALES/USE TAX REFUND

For value received, the undersigned, having authority to execute this assignment, does hereby assign and transfer to

NAME OF ASSIGNEE/PETITIONER

STREET ADDRESS

CITY

STATE

ZIP

all his/her, its or their rights to sales and use tax which may be refunded under Board Docket Number _____. The undersigned further agrees that ___he, it or they will not file a claim for refund for any sales or use tax which is the subject of this assignment.

NAME OF ASSIGNOR/BUSINESS NAME

REVENUE ID NUMBER OR FEIN

DATED: _____

SIGNATURE

CORPORATE SEAL

TITLE

SIGNATURE

TITLE

STATE OF)
COUNTY OF) SS.

On this, the _____ day of _____, 20____
before me, _____, the undersigned officer,
personally appeared _____

known to me (or satisfactorily proven) to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that ___he executed the same for the purpose herein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

MY COMMISSION EXPIRES: