

CITY OF CORDOVA



SALES TAX REIMBURSEMENT

According to CMC 5.40.040.B "A claim for refund of payment or a protest of assessment shall be made by filing with the city manager or his designee a statement of claim, specifying the date the tax was imposed, the amount of protest or refund claimed and the basis upon which the protest or claim for refund is made."

Name: _____ Phone #: _____

Mailing Address: _____

Address City State Zip Code

I am:

applying for a sales tax refund

Building Permit #: _____

disputing a sales tax charge

Date of first receipt: _____

Date of last receipt: _____

Requested amount of sales tax to be refunded: \$ _____

Explanation for refund; please detail vendor name, date range of submitted receipts and requested amount of sales tax: _____

Vendor _____ Receipt Range _____ Sales Tax: \$ _____

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I certify I paid for these charges, am authorized to submit this claim and have provided the necessary documentation (i.e., receipts) to support this request.

Signature

Date

For Finance Department Use Only

Reviewed by: _____

Date: _____

Approved YES NO by: _____

Date: _____

Reason for denial: _____