FIDO: _		
	(OFFICE USE)	

Albert Uresti, MPA, PCC OFFICE OF THE BEXAR COUNTY TAX ASSESSOR-COLLECTOR

REQUEST FOR WRITTEN STATEMENT UNDER TEX. TAX CODE ANN. § 34.015 REGARDING DELINQUENT TAXES

A. Printed name of requ	esting person/company		(max 40 characters)		
B. Mailing address	Phone				
	owned by you under any name in BE ST IN PART IN BEXAR COUNTY		OR SCHOOL DISTRICT THAT IS		
Tax Acct. No.	Legal Description	Property Address	Date Acquired		
1)					
2)					
3)					
4) [Attach additional sl	hoot if needed				
D. List all property <u>for</u> THAT IS LOCATED A Tax Acct. No.	rmerly owned by you under any nan T LEAST IN PART IN BEXAR COL Legal Description	ne in BEXAR COUNTY or in AN UNTY as follows: Property Address	PY CITY OR SCHOOL DISTRICT Date Acquired Date Sold		
<u> </u>	Zegar Z eserripuon		Suit Soid		
1)					
2)					
3)					
(Attach additional she	et if needed]				
I HEREBY REQUE WRITTEN STATE! TAXES OWED B' TERRITORY IN BE	EST THAT ALBERT URESTI, MPAMENT UNDER TEXAS TAX COD Y ME TO BEXAR COUNTY OF EXAR COUNTY. THE INFORMAT VLEDGE AND IS TRUE AND COR	E 34.015 STATING WHETHER T R TO ANY SCHOOL DISTRICT ION FURNISHED BY ME ON TH	THERE ARE ANY DELINQUENT OR MUNICIPALITY HAVING E FORM ABOVE IS WITHIN MY		
		Signature and title, if applica	able, of Requesting Person		
	O SUBSCRIBED BEFORE ME, , 20, TO CERTIFY WI				
(Notary Seal)		Printed Name:	NOTARY PUBLIC, State of Texas Printed Name:		
		Commission expires:			