

REGISTRATION FORM

TETON COUNTY, WYOMING DELINQUENT TAX SALE

NOTE: COMPLETE ONE FORM PER BUYER. THE NAME OR INDIVIDUAL LISTED BELOW, WILL BE ASSIGNED A NUMBER. THE NAME FOR EACH SEPARATE NUMBER, IS THE NAME IN WHICH THE CERTIFICATE(S) OF PURCHASE WILL BE ISSUED. (PLEASE PRINT)

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Mailing)

(City) (State) (Zip Code)

Telephone: _____
(Area Code) (Number)

Fax No.: _____
(Area Code) (Number)

Social Security Number: _____

TAX SALE INFORMATION (To be completed by County Treasurer Staff)

Number Assigned: _____

Type of Payment: _____ (Cash)
_____ (Certified Funds)
_____ (Local Bank Check/Drawn on:
_____ Bank of Jackson Hole
_____ Jackson State Bank
_____ Community First
_____ Other)

Verified by: _____