Town of Raymond

DATE		
REGARDING: PROPER	TY ASSESSMENT APPEAL 20	
ADDRESS:		
	en resolved to your satisfaction, we wi	<u>-</u>
Yours truly		
Hartin Pro	itt	
Kurtis Pratt		
Municipal Clerk		
******	****** <u>PLEASE COMPLETE</u>	***********
I hereby withdraw the	20 Assessment Appeal regarding:	
Roll Number(s):		
	·	
	·	
Dated	Signature	

Fax Number (403) 752-4379

Assessment Clerk Phone (403) 752-3322