

GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF THE CHIEF FINANCIAL OFFICER
OFFICE OF TAX AND REVENUE
OFFICE OF THE RECORDER OF DEEDS



MEMORANDUM

TO: Refund Claimant

FROM: Ida Williams
Record of Deeds

SUBJECT: **Claim for Refund**

DATE: June 19, 2014

In order to consider a claim for refund, the following documentary evidence is required:

1. Claimant must furnish a signed & notarized refund claim form, with a clear explanation for the claim.
2. Claimant must provide a photocopy of the front and back of the cancelled check made payable to the D.C. Treasurer.
3. Claimant and the maker of the check are to be the same person/entity.
4. Claimant must provide document number and date of recording.
5. If payment was made via Automated Clearing House (ACH) debit/credit, provide statement.
6. Any other evidence that will support your claim.



**Government of the
District of Columbia**
Office of Tax
and Revenue
Recorder of Deeds
1101 4th Street, SW
Washington, DC 20024
Phone (202)727-5374

CLAIM FOR REFUND

Date
mm/dd/yyyy

Property Description:

Square(s) Suffix(es) Lot(s)

Address

Instrument No. Date Recorded

Taxpayer's Name

Address

Telephone Number (Day) (Eve)

Amount Paid: Recordation Tax \$

Transfer Tax \$

Explanation of Claim

Please indicate your reason(s) and attach any evidence you may have to support your claim. You may add attachments if more space is needed.

, first being duly sworn on oath, deposes and says that I am the person who paid the tax herein claimed and that I am lawfully entitled to the refund claimed. And, further hereby affirms under penalty of law that the above statement and representations are true and correct.

Signature of Claimant(s)

Subscribed and sworn to before me this day of , 20

Notary Public

[Notary Seal]

My commission expires:
mm/dd/yyyy