Roxane Fuentes, Ed.D. Superintendent

1376 Piedmont Road San Jose, CA 95132-2427



Phone: (408) 923-1800 Fax: (408) 923-0623

Application for Request for Refund for Measure K Parcel Tax 2014-2022 Fiscal Years

To request a refund for Measure K Parcel Tax, please complete this form and send to:

Berryessa Union School District Business Services 1376 Piedmont Road San Jose, CA 95132

A. <u>PROPERTY TAX INFORMATION</u>

1.	County of Santa C	lara Secured Property	Tax Bill Number/APN #:
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- 2. Property Owner's Name: _____
- 3. Property Full Address:
- 4. Daytime Phone: _____ 5. Evening Phone: ____

B. **INFORMATION REQUIRED FOR EXEPTION -** Please attach a copy of the following documents:

PROOF OF AGE: Legal documents indicating that you will be at least 65 on or prior to July 1, 2014 (or July 1 st of the fiscal year for which the refund is requested).			
Driver's License Passport California ID Card Hospital Birth Record Social Sec. Award Letter Birth Certificate Medi-Cal (not Care) Card			
OWNERSHIP OF PARCEL:			
Copy of your County of Santa Clara Secured Property tax bill with Measure "K" fee of \$79. Copy of your cancelled check or other proof of payment.			
EXEMPTION FORM:			
Copy of Exemption form, submitted to the Berryessa Union School District.			

C. PLEASE STATE REASON FOR REQUEST OF REFUND

Under penalty of perjury, I declare that this claim is, to the best of my knowledge, correct and complete.

For Office Use Only: Approved: ____ Denied: ____

Signature:__