

NEVADA DEPARTMENT OF TAXATION

1550 COLLEGE PARKWAY, SUITE 115 CARSON CITY, NEVADA 89706
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**CENTRALLY ASSESSED PROPERTY TAX ANNUAL REPORT
FOR THE YEAR ENDED DECEMBER 31, 2017**

***** COMPLETE REPORT FILING DUE MARCH 31, 2018***
LATE FILING OF THIS ANNUAL REPORT RESULTS IN A PENALTY PER NRS 361.318(4)**

Company Data:

Representative to Contact Concerning this Report:

COMPANY NAME _____.

NAME _____.

TAX DEPT. ADDRESS _____.

ADDRESS _____.

CITY _____.

CITY _____.

STATE _____ **ZIP** _____.

STATE _____ **ZIP** _____.

PHONE _____ **FAX** _____.

NAME OF PARENT FIRM _____.

CONTACT E-MAIL _____.

AFFIDAVIT

I do swear, or affirm, under penalty of perjury the attached data has been prepared under my direction, and together with any accompanying documents the information provided herewith entirely presents all factual data pertaining to any and all operations of the Company or Corporation for the year ending December 31, 2017. I have read and complied with the attached set of instructions.

SIGNATURE OF CORPORATE OFFICER _____.

NAME OF CORPORATE OFFICER _____.

TITLE OF CORPORATE OFFICER _____.

Subscribed and sworn to before me this _____ day of _____, 2018.

SIGNATURE OF NOTARY _____.