

TAXPAYERS' BILL OF RIGHTS HEARING APPEARANCE SHEET

If you wish to speak before the Board of Equalization at the public hearing, or have your issues submitted as part of the public record, please **print** your name, title, company, account number, taxpayer's name (if you are representing someone else), a brief description of the issues you would like to discuss, and contact information. This appearance sheet will be used to introduce you to the Board, identify you in the record of this hearing, and to send you information after this hearing. **Signing or completing this form is voluntary. You may speak at this meeting regardless of whether you sign or complete this form** (Government Code section 11124).

HEARING LOCATION		HEARING DATE	<input type="checkbox"/> I want to speak at the hearing.
			<input type="checkbox"/> I DO NOT want to speak at the hearing.
TYPE OF TAX			
<input type="checkbox"/> Property Tax		<input type="checkbox"/> Alcoholic Beverage Tax	
SPEAKER'S NAME		TITLE (if applicable)	COMPANY (if applicable)
MAILING ADDRESS (street, city, state, zip code)		EMAIL ADDRESS	
TAXPAYER'S NAME (if not the speaker)		ACCOUNT NUMBER	
ORGANIZATION	TELEPHONE NUMBER ()		EMAIL ADDRESS
DESCRIPTION OF ISSUES			

BOE USE ONLY

COPY PROVIDED TO: CHAIR ADVOCATE BOARD CLERK SPEAKER