## OFFICE OF THE CITY CLERK City of Los Angeles Claim for Refund Form (Over \$5,000)

Please mail the original signed form to (copies and faxes not accepted):

- Address: Office of the City Clerk 200 North Spring Street Room 395, City Hall Los Angeles, CA 90012
- Hours: 8:00 am to 4:30 pm, Monday Friday
- Phone: (213) 978-1133

You may also bring the form to our Public Counter at the above address during regular business hours.

Reminder: Please make a copy for your own records.

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Control to submit to su	CLAIM FOR REFUND OVER \$5000	CLAIM NO
Presentation of a false claim is a felory. (California Penal Code Section 72.)  TO: CITY CLERK, Room 395, City Hall, Los Angeles 90012  PRINT NAME OF CLAMANT (Law) (Print) (Middle)  BUSINESS ADDRESS (Stree) (City) (City) (City Code) (Stree) (Stree) (City) (City Code) (A. PHONE NO. (Stree) (Str	Sec. 22.12 Los Angeles Municipal Code	
PRINT NAME OF CLAMMANT (Les)       (First)       (Medile)         BUSINESS ADDRESS (Street)       (City)       (State)         MALLING ADDRESS (Street)       (City)       (Zip Code)       4 PHONE NO.         OTTY DEPARTMENT TO WHICH PAYMENT WAS MADE       4 DATE PAID       7. AMOUNT CLAIMED         STATE WHETHER RECEIPT, LICENSE ON PERMIT, ENTER NO. AND ATTACH       1         LICOATION OF JOB       .       .         REASONS FOR FLING CLAIM (Use Supplementary shoets if necessary)       .         STATE OF CALIFORNIA       .         STATE OF CALIFORNIA       .         STATE OF CALIFORNIA       .         STATE OF CALIFORNIA       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       .         .       . <th>NOTE: A Claimant may be required to submit to examination under oath. (Charter Section 217.) Presentation of a false claim is a felony. (California Penal Code Section 72.)</th> <th></th>	NOTE: A Claimant may be required to submit to examination under oath. (Charter Section 217.) Presentation of a false claim is a felony. (California Penal Code Section 72.)	
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MAILING ADDRESS (Street)       (City)       (Cip Code)       4. PHONE NO.         GTY DEPARTMENT TO WHICH PAYMENT WAS MADE       6. DATE FAID       7. AMOUNT GLAIMED         STATE WHETHER RECEIPT, LICENSE OR PERMIT, ENTER NO. AND ATTACH       8         LOCATION OF JOB	PRINT NAME OF CLAIMANT (Last) (First) (Middle)	
CITY DEPARTMENT TO WHICH PAYMENT WAS MADE		
STATE WHETHER RECEIPT, LICENSE OR PERMIT, ENTER NO. AND ATTACH         LOCATION OF JOB         T. REASONS FOR FILING CLAIM (Use Supplementary sheets if necessary)         STATE OF FILING CLAIM (Use Supplementary sheets if necessary)         STATE OF CALIFORNIA         State	MAILING ADDRESS (Street) (City) (Zip Code) 4. PHONE NO.	
LOCATION OF JOB  D REASONS FOR FILING CLAIM (Use Supplementary sheets if necessary)  STATE OF CALIFORNIA STATE OF CALIFORNIA Ss.  State of california states attached being duly sworn, deposes and says: that, he, is the claimant(s) in the above-entitled claim; that, he		
REASONS FOR FILING CLAIM (Use Supplementary shere if necessary)         STATE OF CALIFORNIA         STATE OF CALIFORNIA         State of the claimant(a) in the above-entitled claim; that	STATE WHETHER RECEIPT, LICENSE OR PERMIT, ENTER NO. AND ATTACH	
STATE OF CALIFORNIA         STATE OF CALIFORNIA         County of Los Angeles         state	LOCATION OF JOB	••••••••••••••••••••••••••••••••••••••
County of Los Angeles ss. 	REASONS FOR FILING CLAIM (Use Supplementary sheets if necessary)	
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County of Los Angeles, being duly sworn, deposes and says: 		
are have that he is the claimant(s) in the above-entitled claim; that has read the foregoing claim and sheets attached thereto, know(s) the contents thereof, and that the same is true of own knowledge, except as to the matters which are therein stated on information or belief, and as to those matters that he believe(s) it to be true.	County of Los Angeles	
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information or belief, and as to those matters that he believe(s) it to be true.	that he is the claimant(s) in the above-entitled claim; that he has read the foregoing cla	
DATE DATE		The matters which are thorein stated on
		DATE
SUBSCRIBED AND SWORN TO BEFORE ME SIGNATURE OF DEPUTY CITY CLERK OR NOTARY PUBLIC	SUBSCRIBED AND SWORN TO BEFORE ME SIGNATURE OF DEPUTY CITY CLERK OR NOTARY PUBLIC	
this day of 20_	this day of 20	

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