COLUMBIA COUNTY SUPPLEMENTAL REAL ESTATE TRANSFER TAX RETURN

| Schedule A—Info | rmation relation | ng to conveyance | | | |
|--------------------|---|----------------------------------|----------|--|--|
| Grantor/Transferor | Name (if individual; last, first, middle initial) | | | Social Security Number | |
| Individual | | | | | |
| Corporation | Mailing Address | | | Social Security Number | |
| Partnership | | | | | |
| Estate/Trust | City | State | ZIP Code | Federal Employer Identification Number | |
| Other | | | | | |
| Grantee/Transferee | Name (if individu | al; last, first, middle initial) | | Social Security Number | |
| Individual | | | | | |
| Corporation | Mailing Address | | | Social Security Number | |
| Partnership | | | | | |
| Estate/Trust | City | State | ZIP Code | Federal Employer Identification Number | |
| Other | | | | | |

Location and description of property to be conveyed

| Tax map designation | Address | City/Village | Town | County |
|---------------------|---------|--------------|------|--------|
| Section Block Lot | | | | |

Type of property conveyed

Date of Conveyance

Date of Contract

One Family Residence

Other

Schedule B—Real estate transfer tax return

| Part I. Apportionment | | |
|---|-------|---|
| Portion of property outside of Columbia County: Yes \Box No If no, proceed to II. below | | |
| If yes: Taxable on % share of assessed value within Columbia County, calculated as follows: | | |
| a. Total Assessed Value: | a. \$ | |
| b. Assessed Value in Columbia County: | b. \$ | |
| c. % of Assessed Value in Columbia County [b. ÷ a. x 100] | c | % |
| d. Columbia County portion of consideration upon which Tax is due [consideration x c. %] | | |
| Part II. Computation of Tax Due | | |
| a. Amount of full consideration if entire parcel is within county OR d. above if applicable | a. \$ | |
| b. If a total exemption is claimed on the TP-584 check here \Box and enter \$0 on this line | b. \$ | |
| c. Taxable consideration (for one family residence, first \$150,000 of consideration is exempt) | c. \$ | |
| d. Tax: \$1 for each \$500, or part thereof, of consideration on line a., b., or c. as applicable | d. \$ | |

Signature (both the grantor(s) and grantee(s) must sign)

The undersigned certify that the above information in Schedules A and B, including any return, certification, schedule or attachment, is to the best of his/her knowledge, true and complete, and authorize the person(s) submitting such form on their behalf to receive a copy for purposes of recording the deed or other instrument effecting the conveyance. The contents hereof shall not be otherwise disclosed.

| Grantor | Title | Grantee | Title |
|-----------------------------|-----------------|---------------|--------------------|
| Grantor | Title | Grantee | Title |
| For Recording Officer's Use | Amount received | Date received | Transaction number |