Alaska Assignment of Rights of Shared Tax or Fee Payment

Assignments must be received by the due date to be accepted. Please read instructions when completing this form.

Assignor (Local Government)		· ·		1 0
Local Government Name Mailing Address				Maximum Amount to be Assigned
				Phone Number
City		Zip Co	de	Fax Number
Assignee (Payment to be assign	ned to)			
State Agency Division			Division	
Mailing Address				Phone Number
City	State	Zip Co	de	Fax Number
Reason for Assignment		I		
This assignment relates to payment of shared taxes or fees to the assignee above for fiscal year from (check one).				<u>Due Date</u>
Aviation Motor Fuel Tax				
				June 30
☐ Commercial Passenger Vessel Excise Tax				December 31
☐ Electric/Telephone Cooperative Tax				June 30
☐ Fisheries Business Tax				June 30
☐ Fishery Resource Landing Tax				June 30
☐ Liquor License Fees				June 30 and December 31
Assignor's Signature Required. This	s assignmer	nt must be	signed in the	presence of a notary public.
I am authorized to assign payment on be named (Assignee), rights to the paymen				or) named above and hereby assign to the agency
Assignor's Signature				Date
Assignor's Printed Name				Position Held with Local Government
This assignment was subscribed	and sworn to		tary Public on this	day of,
20, at		<u>_</u> .		
			Mv comn	nission expires:
Signature of Notary				