

**ATTESTATION FORM FOR USE WHEN  
TAXPAYER CANNOT MAKE CONTACT WITH  
A THIRD PARTY PURCHASER**

I, \_\_\_\_\_, hereby swear/affirm to the following actions:  
Name

A registered letter was mailed to the third party purchaser of record at the address reflected in the most recent notice received from the third party purchaser or at the address reflected in the records of the county clerk in which I indicated my desire to make payment;

The letter has been returned by the postal service as unclaimed or thirty days have elapsed and I have received no response from the third party purchaser; and,

I have provided the county clerk with the certified mail receipts stamped by the post office that document the certified letter was sent to the last known correct address and the date it was mailed. If the letter was returned, I provided the returned letter to the county clerk as well.

I understand that any false statement or omission herein is a violation of KRS 523.040 and that I may be subject to criminal prosecution. Further, I acknowledge that this form is a public record and may be disseminated as such.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Taxpayer

Personally appeared before me, \_\_\_\_\_, who being duly  
NAME OF INDIVIDUAL

Sworn according to law, deposes and says that the statements contained in this application are true and correct.

Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC