

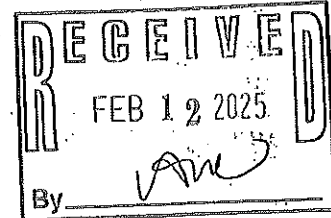
Application for Refund of Taxes Paid

Return to: Ledyard Tax Collector's Office
741 Colonel Ledyard Highway
Ledyard, CT 06339

Amount of Refund
\$3,112.39

Date: January 22, 2025

Patricia Ference
57 Partridge Hollow Rd
Gales Ferry, CT 06335



PLEASE READ, SIGN, AND DATE BELOW:

I am entitled to this refund because I have made the payments from funds under my control, and no other party will be requesting this refund.
I understand that false or deliberately misleading statements subject me to penalties for perjury and/or for obtaining money under false pretenses.
I hereby apply for a refund of taxes paid in accordance with Conn. Gen Sate. 12/129.

Patricia L. Ference
Signature of Applicant/Agent
(Title of agent, where applicable)

[Signature]
Tax Collector's Signature

2/10/25
Date Signed

2/10/25
Date

Do Not Write Below This Box -- Office Use Only

Date of Payment: *1/8/2025*
Grand List Year: *2023*
Grand List Number: *58400*
Payment Type: *Check*
X Received by mail/email

Tax Type: *MV PP RE SMV*
Reason: *Double payment for Jan installment*
Property Owner: *Patricia Ference*
Property Location: *6 57 Partridge Hollow Rd*
Hand delivered in the office

ACTION TAKEN BY GOVERNING BODY

At a regular meeting of the Ledyard Town Council, held on the _____ day of _____, 2025, it was voted to refund property taxes amounting to \$_____ to _____.

Application for Refund of Taxes Paid

Return to: Ledyard Tax Collector's Office
741 Colonel Ledyard Highway
Ledyard, CT 06339

Amount of Refund

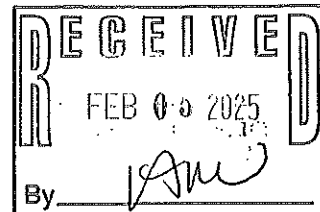
\$2,619.98

Date: January 28, 2025

Jessica Johnson

9 Martys Way

Gales Ferry, CT 06335



PLEASE READ, SIGN, AND DATE BELOW:

I am entitled to this refund because I have made the payments from funds under my control, and no other party will be requesting this refund.

I understand that false or deliberately misleading statements subject me to penalties for perjury and/or for obtaining money under false pretenses.

I hereby apply for a refund of taxes paid in accordance with Conn. Gen Sate. 12/129.

[Signature]
Signature of Applicant/Agent
(Title of agent, where applicable)

[Signature]
Tax Collector's Signature

2-5-25
Date Signed

2/12/2025
Date

Do Not Write Below This Box -- Office Use Only

Date of Payment: 1/15/2025
Grand List Year: 2023
Grand List Number: 27200
Payment Type: Check
Received by mail/email

Tax Type: MV PP RE SMV away
Reason: Double payment for Jan installment
Property Owner: Jessica Johnson
Property Location: 6 Pequot Dr
X Hand delivered in the office

ACTION TAKEN BY GOVERNING BODY

At a regular meeting of the Ledyard Town Council, held on the _____ day of _____, 2025, it was voted to refund property taxes amounting to \$ _____ to _____.

S. Naomi Rodriguez

Application for Refund of Taxes Paid

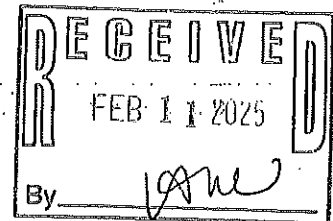
Return to: Ledyard Tax Collector's Office
741 Colonel Ledyard Highway
Ledyard, CT 06339

Amount of Refund

\$3,079.65

Date: January 2, 2025

Law Office of Sean C Donohue
111 Huntington St, Suite 1
New London, CT 06320



PLEASE READ, SIGN, AND DATE BELOW:

I am entitled to this refund because I have made the payments from funds under my control, and no other party will be requesting this refund.

I understand that false or deliberately misleading statements subject me to penalties for perjury and/or for obtaining money under false pretenses.

I hereby apply for a refund of taxes paid in accordance with Conn. Gen Sate. 12/129.

✓ [Signature]
Signature of Applicant/Agent
(Title of agent, where applicable)

[Signature]
Tax Collector's Signature

✓ 2/11/25
Date Signed

2/11/2025
Date

Do Not Write Below This Box -- Office Use Only

Date of Payment: 12/30/2024
Grand List Year: 2023
Grand List Number: 164020
Payment Type: Check
☒ Received by mail/email

Tax Type: MV PP RE SMV
Reason: Double payment for second installment
Property Owner: Amanda Plante
Property Location: 57 Church Hill Rd
Hand delivered in the office

ACTION TAKEN BY GOVERNING BODY

At a regular meeting of the Ledyard Town Council, held on the _____ day of _____, 2025, it was voted to refund property taxes amounting to \$ _____ to _____.

S. Naomi Rodriguez

Application for Refund of Taxes Paid

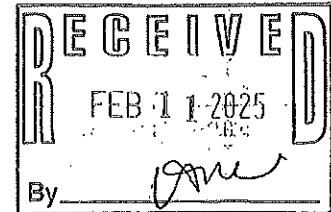
Return to: Ledyard Tax Collector's Office
741 Colonel Ledyard Highway
Ledyard, CT 06339

Amount of Refund

\$4,334.18

Date: January 29, 2025

Sheela Nerurkar
4 Kerrie CT
Gales Ferry, CT 06335



PLEASE READ, SIGN, AND DATE BELOW:

I am entitled to this refund because I have made the payments from funds under my control, and no other party will be requesting this refund.

I understand that false or deliberately misleading statements subject me to penalties for perjury and/or for obtaining money under false pretenses.

I hereby apply for a refund of taxes paid in accordance with Conn. Gen Sate. 12/129.

✓ Sheela Nerurkar
Signature of Applicant/Agent
(Title of agent, where applicable)

[Signature]
Tax Collector's Signature

✓ 02/07/2025
Date Signed

2/12/25
Date

Do Not Write Below This Box -- Office Use Only

Date of Payment: 7/22/2024
Grand List Year: 2023
Grand List Number: 164615
Payment Type: Check
☒ Received by mail/email

Tax Type: MV PP RE SMV
Reason: Double payment for July installment
Property Owner: Sheela Nerurkar
Property Location: 4 Kerrie CT
Hand delivered in the office

ACTION TAKEN BY GOVERNING BODY

At a regular meeting of the Ledyard Town Council, held on the _____ day of _____, 2025, it was voted to refund property taxes amounting to \$ _____ to _____.

S. Naomi Rodriguez