City of Milwaukee

2016 MAR 21 AM11: 23

Dear Members of the Common Council:

In re:

070-9995-113-8 7825 W TOWER AV A STORSAFE STORAGE LLC

Year:

2014

Amount of Assessment Reduction: \$100,000

Amount of Tax Reduction: \$2,997.30

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: 3/18/16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**.

Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: VON BRIEGER & ROOM MAILING ADDRESS: 411 E. WISCONSIN AVE 1000
TRUST ACCOUNT MILWANKER, WI 53202

City of Milwaukee

2016 MAR -1 AM 9: 37

Dear Members of the Common Council:

In re:

249-0841-000-5 5825 W HOPE AV

MID MILK IMPROVEMENTS LLC

Year:

2014

Amount of Assessment Reduction: \$2,120,900

Amount of Tax Reduction: \$63,569.74

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: Z/CS

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Reinhart Boemer Van Mailing address: 22 E. Michin St., Suite 600 Deuran Sc. Trust Account madison, WI 53703

2010.	
2016 MAR -7	
	PH 12: 5A
,	- 1' '< 15A

City of Milwaukee

Dear Members of the Common Council:

In re:

347-0003-000-X 2031 N HI MOUNT BL ADAMS INVESTMENTS LLC

Year:

2014

Amount of Assessment Reduction: \$34,200

Amount of Tax Reduction: \$1,025.07

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: The f Affind

Date: 2-29-16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed <u>first</u> on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: THOMAS J. AGAM!	MAILING ADDRESS: P.O. BOX 340 857
	WEST MILLINKER, WI
	53234

City of Milwaukee

Dear Members of the Common Council:

In re:

396-0492-000-4

818 E CLYBOURN ST

US BANK NATIONAL ASSOCIATION

rcvd 3-1-16 Afice Asses Office

Year:

2014

Amount of Assessment Reduction: \$346,450

Amount of Tax Reduction: \$10,384.15

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed

Date: _7/25

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Reinhart Boerner Van MAILING ADDRESS: 22 E. Mifflin St., Shite 600 Deuren S.c. Trust Account Madison, WI 53703

City of Milwaukee

Dear Members of the Common Council:

In re:

496-0031-000-2 2435 S 16TH ST SOUNAN VIGNAVONG

Year:

2014

Amount of Assessment Reduction: \$34,300

Amount of Tax Reduction: \$1,028.08

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed ent from objection form.

SOUNAN VIGNA VONG

MAILING ADDRESS: 2435 ST /

MILWAU LEE to if different from objection form.

City of Milwaukee

2016 HER 21 AM 11: 23

Dear Members of the Common Council:

In re:

183-9969-110-5

5400-26 N LOVERS LANE RD

DEL RIO LLC

Year:

2015

Amount of Assessment Reduction: \$151,000

Amount of Tax Reduction: \$4,432.92

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: 3/9/16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Von Briesen & Roper MAILING ADDRESS: 411 E. WIS CONSIN AVE # 1000

TRUST ACCOUNT MILWAUKEE, WI 53702

2016 HAR 21 AM 11:28

TO THE HONORABLE, THE COMMON COUNCIL

City of Milwaukee

Dear Members of the Common Council:

In re:

214-9995-114-8

8928 W APPLETON AV

ELDIBANY LLC

Year:

2015

Amount of Assessment Reduction: \$103,000

Amount of Tax Reduction: \$3,023.77

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70,511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: // Clewards

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed <u>first</u> on the name line OR the Employer I.U. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: ELDIBANY LLC

mailing address: $\underline{\mathcal{C}}$

ADAM BIECK

BIECK MANAGEMENT INC.

5205 N IRONWOOD Rd

Glendale, WI 5321

City of Milwaukee

2016 MAR -9 AM 11: 08

Dear Members of the Common Council:

In re:

316-0013-100-4 1824 E PARK PL STEWART M WANGARD

Year:

2015

Amount of Assessment Reduction: \$414,000

Amount of Tax Reduction: \$12,153.81

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: Bra Blumack

Date: 3/7/2016

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: East Park Place, LLC MAILING ADDRESS: 1200 N. Mayfair Rd.

Suite 310

Milwaukee, WI 53226

City of Milwaukee

2016 HAR 15 AMII: 46

Dear Members of the Common Council:

In re:

354-1054-100-7 415 E VINE ST TROSTEL SQUARE APTS LLC

Year:

2015

Amount of Assessment Reduction: \$101,000

Amount of Tax Reduction: \$2,965.06

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Date: ____3 - 1/- 16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Trostel Square Aportunity MAILING ADDRESS: 301 E Eric St.

Milwanker, LVI 53202

City of Milwaukee

2016 MAR 15 AM 11: 46

in.

Dear Members of the Common Council:

In re:

354-1054-300-X 410 E SHIP ST

TROSTEL SQUARE APTS LLC

Year:

2015

Amount of Assessment Reduction: \$15,000

Amount of Tax Reduction: \$440.36

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: _	Don Studenn	
Date: _	3-11-16	·

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**.

Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE:	MAILING ADDRESS:	

City of Milwaukee

2016 MAR 15 AM 11: 46

Dear Members of the Common Council:

In re:

360-0617-110-3

802-830 E OGDEN AV

TCR MRC PHASE I LIMITED PTNR

Year:

2015

Amount of Assessment Reduction: \$980,000

Amount of Tax Reduction: \$28,769.87

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: 3 -11-/6

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Bast Point Commons MAILING ADDRESS: 301 E Fre St.
Milwanter, WI 53202

City of Milwaukee

2016 HAR 15 ATTH: 46

Dear Members of the Common Council:

In re:

360-1821-000-7 1551 N WATER ST # 1

NORTH END PHASE II LLC

Year:

2015

Amount of Assessment Reduction: \$11,000

Amount of Tax Reduction: \$322.94

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: 3-11-16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: North End Phase I MAILING ADDRESS: 301 E Eng St. M: lwanker WI 53202

City of Milwaukee

2016 HAR 15 AH 11: 46

Dear Members of the Common Council:

In re:

360-1823-000-8

455 E PLEASANT ST # 3 NORTH END PHASE II LLC

Year:

2015

Amount of Assessment Reduction: \$690,000

Amount of Tax Reduction: \$20,256.32

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: 3-1/-

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: North End Phase II MAILING ADDRESS: 301 E. E. E. St. M. M. lyanta, WI 53202

City of Milwaukee

2016 MAR 15 AM 11: 46

Dear Members of the Common Council:

In re:

361-2181-000-4

740-750 W WISCONSIN AV

LIBRARY HILL LLC

Year:

2015

Amount of Assessment Reduction: \$2,850,000

Amount of Tax Reduction: \$83,667.45

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: 3-11-16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Library Hill LLC MAILING ADDRESS: 301 E Er. St.
Milwanke, WI 53202

TO THE HONORABLE	THE COMMON COUNCIL	at Albert Constitution	
City of Milwaukee		2016 HAR 15 AM 11: 46	
Dear Members of the C	common Council:	erio de la companya della companya della companya de la companya de la companya della companya	
In re:	361-2182-000-X 700-738 W WISCONSIN A LIBRARY HILL LLC	AV	4
Year	: 2015		
Amo	unt of Assessment Reduct	tion: \$373,000	
Amo	unt of Tax Reduction: \$10	0,950.16	
reduced as indicated abo	ove. Under Section 70.511 (2	the assessment of my property was 2)(b) of the Wisconsin Statutes, I here fund/reduction in the amount shows	by.
Federal laws require that or payment of earned int ncreased the penalties fo	erest. The Tax Equity and F	ity Comptroller's Office at the year-er iscal Responsibility Act of 1982 has	- ıd

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE:	MAILING ADDRESS:	

City of Milwaukee

Dear Members of the Common Council:

In re:

388-1704-000-1

2929 W HIGHLAND BL

AVATAR

Year:

2015

Amount of Assessment Reduction: \$35,000

Amount of Tax Reduction: \$1,027.52

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

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PAYEE: AVATAR PARTNERSHIP

MAILING ADDRESS:

City of Milwaukee

2016 MAR 21 AM 11: 22

Dear Members of the Common Council:

In re:

392-1167-111-8

159-189 N JACKSON ST JACKSON SQUARE LLC

Year:

2015

Amount of Assessment Reduction: \$232,000

Amount of Tax Reduction: \$6,810.84

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: 3 | 9 | 16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: VOI BRIESEN & ROPER MAILING ADDRESS: 411 E. WISCONSIN AVE#1000

MICWAUKEE, WI 53202

City of Milwaukee

Dear Members of the Common Council:

In re:

396-0492-000-4

818 E CLYBOURN ST

US BANK NATIONAL ASSOCIATION

Year:

2015

Amount of Assessment Reduction: \$346,450

Amount of Tax Reduction: \$10,170.75

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date:

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Reinhart Boenner Van MAILING ADDRESS: 22 E. Mifflin St., Shife 600 Deuren 5 c. Trust Account madison, wil 53705

Pursuant to § 70.511(2) (b) if forms are returned on or before November 1, 2015, your refund is payable on or before January 31st, 2016. After November 1, 2015, refund is payable by January 31st, 2017.

rcva 3-1-16 Office ASSRS Office

City of Milwaukee

2016 KAR 15 AH 11: 46

Dear Members of the Common Council:

In re:

429-0116-000-1

444 E CORCORAN AV # 2

GASLIGHT SQUARE APTS II LLC

Year:

2015

Amount of Assessment Reduction: \$1,227,000

Amount of Tax Reduction: \$36,021.02

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed: To Student

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Corroran Lofts Mailing ADDRESS: 301 E Ene St.

M: (wanky, WI 53202

City of Milwaukee

2016 HAR 15 AHII: 46

Dear Members of the Common Council:

In re:

429-0422-000-5

425 E MENOMONEE ST # 2

GASLIGHT SQUARE APTS IN LLC

Year:

2015

Amount of Assessment Reduction: \$2,706,000

Amount of Tax Reduction: \$79,440.03

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Signed:

Date: 3-17-16

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the **Social Security Number** and the **signature** of the person listed <u>first</u> on the name line **OR** the **Employer I.D. Number** of the business and the appropriate person's **signature**. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Gaslight Square Agartments MAILING ADDRESS: 301 E Fr.9 St.
Milwanker, WE 53202

City of Milwaukee

Dear Members of the Common Council:

In re:

526-9993-110-1 3171 S 84TH ST JEFFREY ANDERSON

Year:

2015

Amount of Assessment Reduction: \$14,400

Amount of Tax Reduction: \$422.75

As the result of action by the Board of Review, the assessment of my property was reduced as indicated above. Under Section 70.511 (2)(b) of the Wisconsin Statutes, I hereby make application to your Honorable Body for a tax refund/reduction in the amount shown.

Federal laws require that Form 1099 be filed by the City Comptroller's Office at the year-end for payment of earned interest. The Tax Equity and Fiscal Responsibility Act of 1982 has increased the penalties for non-compliance.

Therefore, on the enclosed Form W-9, we request that you furnish us with the Social Security Number and the signature of the person listed first on the name line OR the Employer I.D. Number of the business and the appropriate person's signature. Please verify below to whom refund is to be made out to and what address it is to be mailed to if different from objection form.

PAYEE: Jeffrey Anderson MAILING ADDRESS: 125 N. 70th St.

/hilwarkee, w1
53213

rcud's office Assk's office 2-26-16

TO THE HONORABLE	, THE COM	MON COUNCIL	Harry Company	
City of Milwaukee			2016 11/4R -4 PH 31 00	
Dear Members of the	Common Co	ouncil:		
In re:		1-100-6 COLLEGE AV SPITALITY LLC		
Yea	r: 20	15		
Amo	ount of Ass	essment Reductio	on: \$492,700	
Amo	unt of Tax	Reduction: \$14,4	464.20	
reduced as indicated ab	ove. Under r Honorable Signed:	Section 70.511 (2)(1	he assessment of my property was (b) of the Wisconsin Statutes, I here and/reduction in the amount shown	by ı.
Federal laws require that for payment of earned in increased the penalties for	terest. The	Tax Equity and Fisc	y Comptroller's Office at the year-en scal Responsibility Act of 1982 has	.d
Employer I.D. Number of	e signature of the busine om refund i	of the person listed ess and the appropr	you furnish us with the Social d <u>first</u> on the name line OR the riate person's signature . and what address it is to be mailed	ŀ

Pursuant to § 70.511(2) (b) if forms are returned on or before November 1, 2015, your refund is payable on or before January 31st, 2016. After November 1, 2015, refund is payable by January 31st, 2017.

MAILING ADDRESS: 8333 Greenway Blvd, Ste 200 Middleton, WI 53562

PAYEE: Milwoukee Airport
Lodging Partners, LP