

Wyoming Bean Commission Assessment Refund Application

Claims for refund may only be received not less than thirty (30), nor more than (90) days from the date of assessment. Form must be notarized, in accordance with Wyoming Statute 11-50-107. The Wyoming Bean Commission cannot accept any form unless it is signed before a notary and the GROWER copy of the receipt of collection is attached, with the complete address of the applicant listed below. Your tax identification number is REQUIRED; no application will be valid without such number. All refunds are taxable and the Commission may submit an information return to the IRS. Effective July 1, 2015. Photocopies of this form are **not** acceptable.

Return completed form to:
 Wyoming Department of Agriculture
 Attn: Dry Bean Commission
 2219 Carey Avenue
 Cheyenne, WY 82002

____ Grower's Receipt of Collection/Settlement Sheet

Name (please print) _____

Title (please print) _____

DO NOT WRITE IN THIS SPACE

NO. _____

DATE RECEIVED _____

DATE REVIEWED _____

AMOUNT REFUNDED _____

CHECK NUMBER _____ DATED _____

	First Handler/Purchaser	Address	Date Collected	Receipt Number	Gross Settlement Amount	Assessment Deducted
1.						
2.						
3.						
4.						
	TOTAL	-----	-----	-----		\$

In accordance with W.S. 11-50-107, I hereby request a refund in the amount of assessment deducted, as stated above. I certify that the above refund is just, correct and remains due and unpaid, and that the amount claimed therein is actually due, according to law.

Signature of Grower _____

Taxpayer Identification Number _____

Address, City, State, Zip Code _____

State of _____ SS.

County of _____

The foregoing was subscribed and sworn before me this _____ day of _____, 20____

Witness my hand and official seal:

_____, Notary Public SEAL