

**G**  
ANIMALS

*Own/ Other	No.	Kind	Age	Purchase Price	Estimated Market Value
Continue List on attachment, in same format, as necessary.				Sub-Total Schedule G	
				Sub-Total Attachment	
				TOTAL	

**H**  
FOREST  
PRODUCTS

*Own/ Other	No.	Description	Estimated Market Value
Continue List on attachment, in same format, as necessary.			Sub-Total Schedule H
			Sub-Total Attachment
			TOTAL

**I**  
OTHER  
TAXABLE  
PERSONAL  
PROPERTY

*Own/ Other	No.	Description	Year of Pur.	Purchase Price	Estimated Market Value
Continue List on attachment, in same format, as necessary.				Sub-Total Schedule I	
				Sub-Total Attachment	
				TOTAL	

**J**  
REAL PROPERTY

Address	Use: Residence or Business

Continue List on attachment,  
in same format, as necessary.

**5. SIGNATURES**

A. DESIGNATION OF REPRESENTATIVE. If it is your desire to be represented by an employee, attorney or accountant with respect to any matter associated with this list, indicate name and address of the person you have authorized and to whom the contents of this list may be disclosed.

Name of person authorized: \_\_\_\_\_

Address: \_\_\_\_\_ Tel. No. ( ) \_\_\_\_\_

B. SIGNATURE OF TAXPAYER. This list, prepared or examined by me, includes all taxable personal property owned or held by the maker of this list on January 1 (except household furniture and effects if a non-domiciliary) and to the best of my knowledge and belief, it and all accompanying schedules and statements are true, correct and complete.

SUBSCRIBED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, UNDER THE PENALTIES OF PERJURY.

SIGNATURE \_\_\_\_\_

Sign Full Name of Individual, Partnership, Association, Trust, Corporation or Limited Liability Company.

IF OTHER THAN AN INDIVIDUAL, SIGNATURE OF AUTHORIZED OFFICER \_\_\_\_\_ Title \_\_\_\_\_

(Print or Type) Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. No. ( ) \_\_\_\_\_