

Marion County Supervisor of Assessments

CHANGE OF ADDRESS REQUEST

I am requesting the mailing address for the following property/properties be changed as follows:

Property to be changed:

<u>Address</u>	<u>City</u>	<u>Parcel Identification Number</u>
_____	_____	____ - ____ - ____ - ____
_____	_____	____ - ____ - ____ - ____
_____	_____	____ - ____ - ____ - ____
_____	_____	____ - ____ - ____ - ____

New mailing address for the parcels listed above:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Person authorizing this change:

Printed name: _____

Signature: _____

Completed form can be emailed to saoffice@marionco.illinois.gov

or

Mail to: Marion County Supervisor of Assessments
100 E. Main St. Rm 101
Salem, IL 62881