

FORMER OWNER CLAIM FORM

*Wheeler v. Beatty, et al., No. 2416-CV25478
Jackson County Reassessment Class Settlement*

ABC1234567890



JOHN Q CLASSMEMBER
123 MAIN ST
APT 1
ANYTOWN, ST 12345

Claim Number: 1111111

PIN: a@b#c\$f%

DEADLINE: This form must be submitted or postmarked by December 3, 2026 (45 days after the Notice Date).

Who should use this form: Use this form ONLY if you no longer own the Jackson County residential property that was over-assessed in 2023 and/or 2024. (If you still own that property, you do not need to file anything, your tax credit will be applied automatically). Estates, personal representatives, heirs, trustees, or successors of deceased owners may also use this form accompanied by reasonable proof of authority or succession.

SECTION 1 — YOUR INFORMATION

Full name: _____

Current mailing address: _____

City / State / ZIP: _____

Phone: _____

Email (optional): _____

SECTION 2 — THE PROPERTY YOU FORMERLY OWNED

Address of the former property: _____

Parcel number (if known): _____

Years you paid the property taxes (check all that apply): ☐ 2023 ☐ 2024

Approximate date you sold / transferred / otherwise ceased to own it: _____

☐ Check here if you are filing on behalf of a deceased owner's estate as a personal representative, heir, trustee, or successor, and please attach reasonable proof of authority or succession (e.g., order of appointment, affidavit deemed acceptable to the Settlement Administrator).

Relationship/authority: _____

SECTION 3 — SELECT ONE

- ☐ **Option A — I own another residential property in Jackson County.** I request that the credit be applied to that property's tax bills in three equal, annual installments starting in 2026 or as soon as such payments are ordered to start by the Court. Address and parcel number of my current Jackson County property:
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- ☐ **Option B — I do not own residential property in Jackson County.** I request my overpayment in cash in three equal, annual installments starting in 2026 or as soon as such payments are ordered to start by the Court, paid to the address in Section 1.

SECTION 4 — SUPPORTING INFORMATION (OPTIONAL BUT HELPFUL)

A signed claim form is generally sufficient. If readily available, you may attach copies of any of the following, which may speed processing: a closing or settlement statement, deed, tax bill or payment receipt, probate or trust papers (for estates/successors), or proof of your current Jackson County property (for Option A). **Do not send originals.**

SECTION 5 — ATTESTATION AND SIGNATURE

By signing below, I attest under penalty of perjury that: (1) I (or the person or estate on whose behalf I am authorized to act) owned the property identified in Section 2 and paid the 2023 and/or 2024 real-property taxes on it; (2) the information on this form is true and correct to the best of my knowledge; and (3) I have not received, and will not seek, a duplicate recovery of the same tax amount through a protest-impound or appeal refund or another claim in this settlement.

Signature: _____

Printed Name: _____

Date Signed: _____

HOW TO SUBMIT

Mail this form to the Settlement Administrator at Analytics Consulting LLC, PO Box 2010, Chanhassen, MN 55317-2010 or JacksonCoPropertyTaxLawsuit@hfmlegal.com or submit it online at **www.jacksoncountypropertytaxclassaction.com**, Questions? Call **888-969-3783**, (toll-free). If your claim has a curable problem, the Administrator will notify you and give you at least 21 days to fix it. If your claim is denied, you may seek review within 14 days of the denial.