



Katherine D. Arviso
Apache County Treasurer
P.O. Box 699
St Johns, AZ 85936

Form AC-001

Tax Lien Purchaser Information

Name: _____

Address: _____

City, State & Zip Code: _____

Phone #: _____

Please note ... Original certificate(s) will be held by the Apache County Treasurer's Office.

The name(s) listed above will be the name(s) that appear on your Certificate(s) of Purchase and your investor file with us. Please be certain of how you wish the name(s) to appear.

Upon redemption by the owner, a refund will be mailed to you at the above listed address. Please keep your address current with our office.

**A Federal form W-9 must be on file with our office. Please download, print and include with this form.
This may be downloaded from www.irs.gov/pub/irs-pdf/fw9.pdf**

Signature: _____

(We require an original signature)

Date: _____