

IN THE OREGON TAX COURT
MAGISTRATE DIVISION

_____,)
 _____,)
) TC-MD _____
 Plaintiff(s),)
 v.)
)
Note: Identify the defendant(s) named in your complaint.)
)
 _____ COUNTY ASSESSOR)
) **STATEMENT FOR COSTS AND**
 DEPARTMENT OF REVENUE,) **DISBURSEMENTS FOR:**
 State of Oregon,)
) **PLAINTIFF(S)**
 Defendant.) **DEFENDANT(S)**

The undersigned offers the following facts in support of an award of costs and disbursements:

1. Plaintiff(s)/Defendant(s) is/are entitled to recover costs and disbursements pursuant to the following facts, statute, or rule:

2. A detailed accounting of costs and disbursements (e.g., filing fees, copying costs, postage) is set forth in the attached Exhibit 1. All applicable receipts are attached.¹ These costs and disbursements are supported by TCR-MD 16 or other statute or rule. Plaintiff(s)/ Defendant(s) is/are entitled to an award of costs and disbursements in the sum of \$_____.

I hereby declare that the above statement, including the information contained in the exhibits to this statement, is true to the best of my knowledge and belief, and that I understand it is made for use as evidence in court and is subject to penalty for perjury.

Date _____ Signature _____

Type or print name _____

¹ Receipts should be attached for all claimed costs and disbursements except the filing fee.

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)	
)	
)	TC-MD _____
Plaintiff(s),)	
v.)	
)	
<i>Note: Identify the defendant(s) named in your complaint.</i>)	
)	
_____ COUNTY ASSESSOR)	
)	
<input type="checkbox"/> DEPARTMENT OF REVENUE,)	
State of Oregon,)	
)	
Defendant.)	EXHIBIT 1

The following is a true accounting of the costs and disbursements incurred by Plaintiff(s)/ Defendant(s) in the above-captioned matter:

Item	Amount	Receipt attached?
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>