



STATE OF ILLINOIS  
PROPERTY TAX APPEAL BOARD

**CERTIFICATE**

I, \_\_\_\_\_, Member/Commissioner of the Board of Review, do hereby certify that copies of petitions filed with the Property Tax Appeal Board by appellant, \_\_\_\_\_, under Property Tax Appeal Board Docket Number(s) \_\_\_\_\_, were mailed to all taxing districts as shown on the last available tax on \_\_\_\_\_ (date petitions mailed to taxing districts).

\_\_\_\_\_  
Signature of Board Review Member, Commissioner, or designee

DATED: \_\_\_\_\_

**Please submit to:**

PROPERTY TAX APPEAL BOARD  
ROOM 402 STRATTON OFFICE BUILDING  
401 SOUTH SPRING STREET  
SPRINGFIELD IL 62706-4001

Phone: (217) 782-6076