HERNANDO COUNTY VALUE ADJUSTMENT BOARD EXCHANGE OF EVIDENCE FORM

PETITIONER:		PETITION #(s):
Please mail, hand deliver or e-mail the completed form and your evidence to:		
201 Howell Ave, 3 Brooksville, FL 34 (352) 754-4190 pa-vab@hernand	1601-2042 locounty.us	e that refers to an email size limit, please contact our office for assistance.
EXHIBIT #	BRIEF SUMMARY OF EVIDENCE	
1		
2		
3		
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5		
6		
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10		
* Attach an additional sheet if necessary		
WITNESS NAME		BRIEF SUMMARY OF EVIDENCE (written or verbal)

Rev. 8/2018