STATE TAX FORM 151 Page

THE COMMONWEALTH OF MASSACHUSETTS _____ OFFICE OF THE BOARD OF ASSESSORS
Name of City or Town

ABATEMENT RECORD LEVY OF 20____ MOTOR VEHICLE AND TRAILER EXCISE

VALUATION LIST PAGE LINE	NAME OF OWNER OF MOTOR VEHICLE OR TRAILER	DESCRIPTION OF VEHICLE YEAR MAKE TYPE	DATE OF COMMITMENT	EXCISE ASSESSED	DATE OF APPLICATION FOR ABATEMENT	DATE OF REFUND OR ABATEMENT	ABATEMENT CERTIFICATE NUMBER	AMOUNT OF REFUND OR ABATEMENT

TOTAL: _____

Signed this _____ day of _____, 20__

_____ BOARD OF ASSESSORS
_____
_____ OF _____

THIS FORM IS APPROVED BY THE COMMISSIONER OF REVENUE