

Memorandum Of Lease

**Lessee****Liability Code 3310**

Last Name of Lessee	First Name	Middle Initial	Colorado Account Number	
DBA (as recorded on State license)			Telephone Number ()	
Street Address (where property is now located)		City	State	Zip

Lessor

Last Name of Lessor	First Name	Middle Initial	Telephone Number ()	
Street Address (where property was located)		City	State	Zip

Description of Property Leased: (Use reverse side if additional space is required)

\$2.50 Filing Fee Required	File With: Colorado Department of Revenue 1375 Sherman Street, Room 504 PO Box 17087 Denver CO 80217-0087 Phone: (303) 866-3711	Signature of Lessor:
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