

OP-236 Schedule A
Supplemental Information for Real Estate Conveyance Tax Return

Town: _____
Location of Property Conveyed: _____
Date Conveyed: _____ Date Recorded: _____
Check here if the transaction is completed on one deed. ▶ Yes No

- Grantor/Seller
- Grantee/Buyer
- Other: See Line 12 instructions.

Use form *OP-236 Schedule A* to provide the required information if there are additional grantors/sellers, grantees/buyers, partners, shareholders, members, or beneficiaries that are grantors. Check a box above to indicate who is providing this information.

Last Name, First Name, Middle Initial ▶	Taxpayer Identification Number ▶ <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address (Number and Street) (Mailing Address After Conveyance) ▶	City or Town State ZIP Code ▶

Last Name, First Name, Middle Initial ▶	Taxpayer Identification Number ▶ <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
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