REQUEST FOR TAX REFUND

Name of taxpayer(s) or business entity Mailing Address:	Animal Medical Center Of the Peninsula P.C 2816 Geo Wash Mem Hwy Yorktown, Va. 23693 Acct# 001200

Reason for request (attach additional information): Per Statement, Business sold on May 18, 2005, to National Veterinary Associates (see new acct.). Taxpayer is requesting a refund of 2005 prorated Business License Tax. Df

Declaration: I declare that the statements and figures hereon are true, full and correct to the best of my knowledge and belief:

See Attached — Signature of taxpayer or authorized officer

June 3, 2005 — Date

Type of Tax Tax Year Ticket #	Description of Property	Amount of Tax to be Refunded	
Business License **2005** **00003280008**	Business License Tax	Tax:	$ 3059.37
GL# 3-010-30312-3010		Penalty:	$
GL#		Interest	$
GL# 3-010-30312-3010		**TOTAL:**	**$ 3059.37**
		Tax:	$
Amount of Refund for Taxes Paid			**$ 3059.37**
GL# 3-010-30312-3012		**Interest Paid by the County**	$ 76.48
	TOTAL REFUND DUE		$ 3135.85

REFUND AUTHORIZATION

Commissioner of the Revenue

I have reviewed the above request for a tax refund, and concur that the taxpayer is entitled to the refund indicated for the following reason(s: Per Statement, Business sold on May 18, 2005, to National Veterinary Associates (see new acct.). Taxpayer is requesting a refund of 2005 prorated Business License Tax. Df

Ann H Thomas — Commissioner of the Revenue

6/3/05 — Date

Treasurer

I hereby verify that the aforementioned taxpayer(s) have made payment of tax for which a refund has been requested. Such payment; and any amount owed the County by the taxpayer(s) which should be deducted from any refund made to the taxpayer, are in the following amounts:

— 0 —

Deborah B. Robinson DD — Treasurer

6-6-05 — Date

County Attorney

Pursuant to the provisions of Section 21-7.3, York County Code, I hereby consent to a tax refund to the taxpayer in the amount authorized by the Commissioner of the Revenue, less any amount owed the County by the taxpayer(s).

County Attorney

Date

Financial and Management Service

In accordance with the above authorizations, the refund above has been issued accordingly.

Financial and Management Service

Date

Hospital Member
AAHA
AMERICAN ANIMAL HOSPITAL ASSOCIATION

ANIMAL MEDICAL CENTER OF THE PENINSULA, P.C.
DR. B. ALLEN MEYER
DR. JAMES C. FOLEY
2816 GEORGE WASHINGTON MEMORIAL HIGHWAY
YORKTOWN, VA 23693
TELEPHONE: 867-8808

May 19, 2005

Ann H. Thomas
Commissioner of the Revenue
County of York, Virginia
P.O. Box 189
Yorktown, VA 23690-0189

Animal Medical Center of the Peninsula P.C. 2816 Geo Wash Mem Hwy Yorktown VA 23693	was sold to	National Veterinary Associates 4165 E. Thousand Oaks Boulevard, Suite 350 Westlake Village, CA 91362-3852 Tel: (805) 777-7722 Fax: (805) 496-2222

on May 18, 2005. Please refund our York County Business License as of this date.
Thank you for your time!

Sincerely,

B. Allen Meyer

B. Allen Meyer
President