



County of York Treasurer's Office Tax Pay My Way Program Cancellation

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Name _____
Mailing Address _____
Best Contact Number _____

I would like to withdraw from the Tax Pay My Way Program. **Cancellation is effective upon receipt by the Treasurer's Office.**

- Stop debiting my: Checking account
 Savings account
- For my: Personal Property Taxes
 Real Estate Taxes
 Both Personal Property Taxes and Real Estate Taxes

Signature _____ Current Date _____