Town of Sterling



Senior Citizen Property Tax Work-Off Program Record of hours and type of work performed

For work performed in the month of _____

Please submit this document no later than **5 days** after the end of the month. Submit only ONE document per month.

<u>Hours worked</u>

Date	Hours	Department	Type of work – (clerical, office coverage, custodial)	Supervisor's signature

Total monthly hours _____

Participant Signature

By signing and submitting this document you declare that you are still the property owner, as specified in your application.