

# Municipal Board of Examiners Inc.,

*Of Polk County, Fl.*

## *Reciprocity Letter Request*

I, \_\_\_\_\_ MBOE card # \_\_\_\_\_, request

a letter of reciprocity be sent to the following jurisdiction:

Jurisdiction: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_

Attn: \_\_\_\_\_

Please send by: (check one)

Mail \_\_\_\_\_

Email: (address) \_\_\_\_\_

Fax: (number) \_\_\_\_\_

I certify I have paid the fee of \$ \_\_\_\_\_ via paypal.

Cardholder signature: \_\_\_\_\_