-262-AH-R08-0514-25000582-1 E-262-AH (P1) REV. 08 (05-14) CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 wou enter "2011-2012.")	uld	Cheri Budmark Modoc County Assessor 204 Sout Court Street, Suite 106 Alturas, CA 96101 Phone: (530) 233-6218 Fax: (530) 233-6237 assessor@co.modoc.ca.us	
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) Г		FOR ASSESSOR'S USE ONLY Received	
To receive the full exemption, this claim	must be filed with	h the Assessor by February 15.]
NAME OF CHURCH, ORGANIZATION, ETC.			
WEBSITE ADDRESS (IF ANY)			
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)			
CITY, STATE, ZIP CODE			
ADDRESS OF PROPERTY (NUMBER AND STREET)	ASSESSOR'S PARCEL NUMBER		
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMANT	
 Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only and claims exemption on all I Land Buildings and im Are all buildings and equipment claimed as exempt used solely for Yes No 	provements and/o	,	?
3. Is the land claimed as exempt required for the convenient use of	these buildings?		
Yes No			
4. Is all real property used by the church upon which exemption i parking of automobiles of persons attending or engaged in reli commercial purposes?			
Commercial purposes does not include the parking of vehicles o costs of operating and maintaining the property for parking purpo if the congregation of the church, religious congregation, or sect	ses. Leased property	used for parking purposes is eligible for exemption	
5. List all uses of the property:			
6. a. Is an elementary school and/or secondary school being opera	ted at this location?		
Yes No			
b. Is a children's day care center being operated at this location and infant care centers)?	(a children's day care	e center includes licensed nursery schools, presch	100ls,
Yes No			
Note: If the answer is YES to a. or b. above, the property is not eligil church and used for religious worship, preschool purposes, nursery s grade (grades 1 - 12), or for the purposes of both schools of collegiate Religious Exemption. The Religious Exemption has a "one-time fill claimant may wish instead to annually file by February 15 for the Welfa	school purposes, kinder e grade and schools of l ng" provision and sho	rgarten purposes, school purposes of less than colle less than collegiate grade, the claimant may qualify for	egiate or the

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7. Is the real property listed on this claim owned by the church?

Yes No If NO, state the name and address of owner:

	T NO, state the name	and address of owner:				
OWNER NAME						
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)				CITY, STATE, ZIP CODE		
		hurch for parking purposes?				
		egation of the church, religio		0	ers?	
		S, the property, or portion the		•		
that the church payments, or a re	exemption is taken efund of such payme	exemption must inure to the into account in fixing the nts, if paid, for each month aid during such fiscal year by	terms of agreement of occupancy (or use)	, the church shall recein, or portion thereof, durin	ve a reduction in rental	
		is property? If YES, a claim f the property so used, to be		tion must be filed with the	Assessor by February 15	
10. Is any portion of	this property being u	sed for living quarters for any	person? If YES, descu	ibe that portion:		
Exemption. Conta	ict the Assessor.	for the Church or Religious	Exemptions. Certain	living quarters may be e	kempt under the Welfare	
	this property vacant					
🗌 Yes 🗌 No	If YES, describe that	t portion:				
	of this property been r , January 1 last year	ented to, leased to, or been us	sed and/or operated by	some person or organizati	on other than the claimant	
🗌 Yes 🗌 No	If YES, describe:					
If property is lease	ed to another church.	provide the name and mailir	g address:			
CHURCH NAME						
MAILING ADDRESS	(NUMBER AND STREET	/P. O. BOX)		CITY, STATE, ZIP CODE		
		for worship only) is not eligib e Welfare Exemption. Conta		nption. It may be exempt if	the claimant (owner) and	
•		se of the property or any cor		and/or completed on this	property	
	, January 1 last year				property	
🗌 Yes 🗌 No	If YES, describe:					
	If YES, list the name	this location being leased or and address of the owner ar lusively for religious worship,	d the type, make, mod	el, and serial number of th		
	Whom should	we contact during normal	business hours for	additional information	?	
NAME				TITLE		
DAYTIME TELEPHONE		EMAIL ADDRESS				
()						
		CERTI	FICATION			
I certify (or declare)	under penalty of perj	ury under the laws of the Stat	te of California that the	foregoing and all informat	tion hereon, including any	

accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.

SIGNATURE OF PERSON MAKING CLAIM

TITLE

DATE

NAME OF PERSON MAKING CLAIM

