EF-270-AH-R05-0810-53000185-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257

Shanna White

Fax: (530) 623-8398 assessor@trinitycounty.org

County Clerk-Recorder-Assessor

FROM PROPERTY TAXES

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STAT	E, ZIP CODE)				
ADDRESS OF EXHIBITION (STR	EET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL F	PROPERTY FOR WHICH E	XEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
I hereby state that:					
exhibit of lite state; (b) I intend to re (c) The property	y is brought into this state excluerary, scientific, educational, religing emove the property from the state y is subject to taxation in some our country have been paid.	ous, or artistic works in the following its use or exhi	his state and is used only for bition here;	these purposes while in this	
			Whom should we contact during normal business hours for additional information?		
FOR A	ASSESSOR'S USE ONLY	NAME			
		ADDRESS (STRE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PHONE	E NUMBER		
On(date)		E-MAIL ADDRES:	E-MAIL ADDRESS		
		CERTIFICATION			
	under penalty of perjury under the companying statements or docun				
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

