EF-268-B-R11-0522-03000177-1 BOE-268-B (P1) REV. 11 (05-22) FREE PUBLIC LIBRARY OR FREE MUSEUM CLAIM PROPERTY USED SOLELY FOR EITHER A FREE PUBLIC OR FREE MUSEUM.	LIBRARY	James B Rooney Assessor of Amador County 810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721		
This claim is filed for fiscal year 20 20 (Example: a person filing a timely claim in January 2011 would enter "2011-2012.") NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		claimant must complete and file this form th the Assessor by February 15.		
L If you no longer seek an exemption at this location, check here	_ ⊃ Sign and return this form to	the Assessor. Date vacated:		
NAME OF PERSON MAKING CLAIM		TITLE		
NAME AND ADDRESS OF OWNER OF LAND AND BUILDINGS (if differen	nt from above)			
NAME OF INSTITUTION				
MAILING ADDRESS OF INSTITUTION (CITY, STATE, ZIP CODE)				
ADDRESS OF PROPERTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER		
CITY, COUNTY, ZIP CODE		LEASE TERMINATION DATE		
DAYS OF THE WEEK OPEN TO THE PUBLIC AND HOURS OF OPERATI	ION			
$\overline{\checkmark}$ Check the type of qualifying exclusive use of the property.	If filing for the first time attach	a conv of the lesse or pareement		
LIBRARY		a copy of the lease of agreement.		
1. Yes No Is admittance to the library or museum free	ee? If no, please explain:			
2. *Yes No If a library, is there a user charge for the u		ties?		
3. • Yes No If a museum, is there a charge for viewing	-			
Office immediately. The deadline for time	ly filing a Claim for Welfare Exen	d for the property, please contact the Assessor's aption is February 15 each year. Where there is a ganization and the use of the property meet all of		
4. Yes No Is the property, or a portion thereof, for whi income as defined in section 512 of the In		okstore that generates unrelated business taxable		
		nal Revenue Service must accompany this claim. usiness taxable income to the bookstore's gross		
5. Yes No Is any of the owned property used for sale	es or business purposes other that	n a bookstore? If yes, please explain:		
 Yes No Is any equipment or other property at this If yes, list in the remarks section the nam the property. "Exclusive use" is not require 	e and address of the owner and	the type, make, model, and serial number of		
The benefit of a property tax exemption must inure to the lessee institution; the lessee may be entitled to claim a refund of taxes paid by the lessor. See section 202.2 of the Revenue and Taxation Code.				
	SUBJECT TO PUBLIC IN	SPECTION		
EF-2640-R11-0522-03001177				

BOE-268-B (P2) REV. 11 (05-22)

7. List only property that is owned. Leased property may also be exempt if listed under the remarks section below. If leased property is listed, it is not necessary for the lessor to also claim the exemption on the Lessors' Exemption Claim.

PROPERTY DESCRIPTION	STATE PRIMARY AND INCIDENTAL USE OF PROPERTY DESCRIBED
Land: (Legal description or map book, page and parcel number from most recent tax statement)	Primary use:
	Incidental use:
Area: (Acres or square feet)	
Buildings and Improvements	Primary use:
Bldg. No. No. of No. of Type of or Name Floors Rooms Construction	
	Incidental use:
Personal Property: Describe - include cost and acquisition dates if applicable. (Attach a separate sheet if necessary.)	Primary use: Incidental use:

REMARKS

Whom should we contact during normal business hours for additional information?

NAME		TITLE
	EMAIL ADDRESS	
()		
	CERTIFICATION	l
l certify (or declare) under p including any accom	enalty of perjury under the laws of the State of Calif panying statements or documents, is true, correct, a	ornia that the foregoing and all information contained herein, and complete to the best of my knowledge and belief.
NAME OF PERSON MAKING CLAIM		TITLE
SIGNATURE OF PERSON MAKING CLAIM		DATE
EF-2686-B411-0522-03000177		