-269-FIR-R02-0308-03000763-1 DE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION I ASSESSOR'S FIELD INSPECTIO		WIDOR COL	As 81/ Jac PH	mes B Rooney sessor of Amador Court Street kson, CA 95642 : (209) 223-6351 X: (209) 223-6721	<sup>-</sup> County	
REGULAR ASSESSMENT	Т			X. (209) 223-0721		
Information for Property No.						
Name of organization						
Address of <i>this</i> property						
Owner only Operator only	Owner-Operator	Date of last ins	et, city, zip code)	tv		
If claimant is owner, name of operat				- J		
If claimant is operator, name of own						
A. Claimant is primarily: (check only one) 1. chari						
B. Use of property						
1. The primary activity the p	roperty is used for is: (ch	eck only one)				
<ul> <li>a. administration</li> <li>b. commercial</li> <li>c. educational</li> <li>d. farming</li> <li>m. other (<i>explain</i>)</li> </ul>	☐ f. fund rai ☐ g. hospital ☐ h. housing	1		<ul> <li>i. medical (not hosp</li> <li>j. recreational</li> <li>k. rehabilitation</li> <li>l. informational</li> </ul>	oital)	
2. Other activities the prope	erty is used for are: a. Lis	st letters used in E				
<ul> <li>b. Other(<i>explain</i>)</li> <li>3. All or part (write in all or part)</li> </ul>						
b. vacant or unused house personnel whose pr	c. in	excess of that re	asonably necess	ary	d. ι	used to
<ul> <li>C. Operation of property for</li> <li>1. In your opinion are service</li> <li>If answer is yes, explain: _</li> </ul>	r benefit of persons es and expenses excessiv	ve?			□ Yes	
<ol> <li>In your opinion do operational de la superiorita y este esta esta esta esta esta esta esta</li></ol>	ons enhance anyone's priv	vate gain?			□ Yes	🗌 No
<ol> <li>In your opinion is the claim If answer is <b>no</b>, explain:</li> </ol>	nant's proposed new capit	tal investment, if a	ny, necessary?		🗌 Yes	🗌 No
D. <b>Ownership of real property</b> ( If answer is <b>no</b> , explain:			xact name of clai	nant	☐ Yes	🗌 No
			_ Did owner file	an exemption claim?	🗌 Yes	🗌 No
<ul><li>E. Supplemental Assessment (</li><li>1. Date of change in ownersh</li></ul>	nip				🗌 Yes	🗌 No
Ownership in name of claim 2. Date of completion of new	construction					
Explain what was construct 3. Date put to exempt use			If c	nly a portion of the pro	operty is p	ut to an
<ul> <li>exempt use, describe exert</li> <li>4. Notice: date mailed</li> <li>5. Date claim for exemption for</li> <li>6. Date first installment of superstant</li> </ul>	rom Supplemental Asses	sment was filed w	ith Assessor		🗆 N	
<ul> <li>F. A claim for veterans' organiz</li> <li>1. was filed last year  Ye</li> </ul>	zation exemption on <i>thi</i> s	s property:	_			
<ul><li>3. was not filed last year, but</li><li>G. Recommendation: 1. Appro</li></ul>						
Reason for denial (if partial de	( )	to be denied)				,
Date	In	spection for			,	
		Ву			,	Designe

