EF-270-AH-R05-0810-05000240-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

Calaveras County Assessor 891 Mountain Ranch Road San Andreas, CA 95249

Larie Durham

209.754.6356 assessorpublic@co.calaveras.ca.us

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, STATE	, ZIP CODE)				
ADDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	ROPERTY FOR WHICH E	EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
hereby state that:					
	is subject to taxation in some of country have been paid.		ountry while in this state, and Whom should we contact d business hours for additiona	luring normal	
		NAME	business nours for additiona	ii information?	
FOR A	SSESSOR'S USE ONLY	INAIVIE			
		ADDRESS (STR.	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by					
	(Assessor's designee)				
of	(county or city)	DAYTIME PHON	E NUMBER		
on	, , ,	()	()		
<u> </u>	(date)	E-MAIL ADDRES	SS		
		CERTIFICATION			
	under penalty of perjury under thompanying statements or docum				
SIGNATURE OF PERSON MAKING	G CLAIM	TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION