EF-270-AH-R05-0810-11000223-1 BOE-270-AH REV. 05 (08-10)

## EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

Assessor 516 W. Sycamore St., 2nd Floor Willows CA 95988

Willows CA 95988 Phone: (530) 934-6402 Fax: (530) 934-6571

**Sendy Perez** 

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, ZIF	P CODE)					
ADDRESS OF EXHIBITION (STREET,	BOOTH FTC : BF SPECIFIC)					
ABBREOG OF EXHIBITION (O'MEE),	500 TT, 210., 52 07 2011 107					
	LIST ALL PERSONAL F	PROPERTY FOR	WHICH EXEMPTION	IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES	PAID AMOUN	NT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.						
3.						
4.						
5.						
state; (b) I intend to remove (c) The property is	v, scientific, educational, religions ve the property from the state subject to taxation in some country have been paid.	e following its us	e or exhibition here preign country while Whom sh	e; e in this state, and could we contact d	all current taxes due in the	
FOR ASSESSOR'S USE ONLY			business hours for additional information?			
Received by			ADDRESS (STREET, CITY, STATE, ZIP CODE)  DAYTIME PHONE NUMBER			
on	(date)	(	) IIL ADDRESS			
CERTIFICATION						
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information 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	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

