EF-270-AH-R05-0810-14000686-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

Dave Stottlemyre, Assessor PO Box J Independence, CA 93526 760 878-0302 Phone inyoassessor@inyocounty.us

County of Inyo

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

ADDRESS (STREET, CITY, STA	TE, ZIP CODE)			
ADDRESS OF EXHIBITION (STE	REET, 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.				
exhibit of lite state; (b) I intend to re (c) The propert	ty is brought into this state excluerary, scientific, educational, religing emove the property from the state by is subject to taxation in some of country have been paid.	ious, or artistic works in the following its use or exhi	his state and is used only for ibition here;	these purposes while in this
Whom should we contact during nor business hours for additional informa				
FOR	ASSESSOR'S USE ONLY	NAME		
Received by		ADDRESS (STRE	EET, CITY, STATE, ZIP CODE)	
of	(county or city)	DAYTIME PHONE	ENUMBER	
on	(date)	E-MAIL ADDRESS	S	
		CERTIFICATION		
	under penalty of perjury under th companying statements or docun			
SIGNATURE OF PERSON MAKI	SIGNATURE OF PERSON MAKING CLAIM			DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION