EF-270-AH-R05-0810-20000319-1 BOE-270-AH REV. 05 (08-10)

## **EXHIBITION EXEMPTION CLAIM**

**Madera County Assessor** 200 West 4th Street Madera, CA 93637-3548

**Brett Frazier** 

Phone: (559) 675-7710 Fax: (559) 675-7654

www.maderacounty.com/government/assessor

## **FROM PROPERTY TAXES**

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, 2	ZIP CODE)				
ADDRESS OF EXHIBITION (STREE	T, 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.					
I hereby state that:					
state; (b) I intend to rem (c) The property i	nry, scientific, educational, religitations to the property from the state is subject to taxation in some ocountry have been paid.	e following its use or exhi	ibition here;		
Whom should we contact during normal business hours for additional information					
FOR AS	SSESSOR'S USE ONLY	NAME			
		ADDRESS (STRE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by					
,	(Assessor's designee)				
of	(county or city)	DAYTIME BHONE	E NI IMPED		
on		( )	DAYTIME PHONE NUMBER  ( )		
	(date)	E-MAIL ADDRES	S		
		CERTIFICATION			
	nder penalty of perjury under the mpanying statements or docun				
SIGNATURE OF PERSON MAKING	CLAIM	TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

