EF-261-D-R02-0810-25000134-1 BOE-261-D (P1) REV. 02 (08-10)

LEGAL RESIDENCE ADDRESS

VOTER REGISTRATION CITY

SERVICEMEMBERS CIVIL RELIEF ACT DECLARATION

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.

Kristen DePaul Modoc County Assessor

204 Sout Court Street, Suite 106 Alturas, CA 96101 Phone: (530) 233-6218 Fax: (530) 233-6237 assessor@co.modoc.ca.us

STATE

STATE

ZIP CODE

YEAR LAST VOTED

| servicemember is serving | n compliance with military orders | S. | | | | |
|--------------------------|-----------------------------------|--------------|----------------------|----------------|----------|----------|
| SERVICEMEMBER NAME | | | | DAYTIME TELEP | HONE NUM | BER |
| RANK | ORGANIZATION | SOCIAL SECUR | ITY OR SERIAL NUMBER | E-MAIL ADDRESS | 3 | |
| MAILING ADDRESS | | • | CITY | • | STATE | ZIP CODE |

LIST BELOW ANY PERSONAL PROPERTY OR MANUFACTURED HOME LOCATED IN CALIFORNIA.

CITY

COUNTY

| PERSONAL PROPERTY | | | | | | | |
|-------------------|---------------------|---------------------|--|--|--|--|--|
| PROPERTY TYPE | DESCRIPTION | SERIAL/ID NUMBER | | | | | |
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| | | | | | | | |
| MANUFACTURED HOME | | | | | | | |
| MANUFACTURER | YEAR OF MANUFACTURE | DECAL/SERIAL NUMBER | | | | | |
| | | | | | | | |

INSTRUCTIONS:

- 1. List personal property by type, description, and serial number or ID number.
- 2. Enter the manufacturer, year of manufacture, and decal or serial number of a manufactured home.
- 3. Attach a copy of your current leave and earnings statement.
- 4. Sign and date the declaration. If you are signing this document with Power of Attorney, attach a copy of the document through which you have been granted the Power of Attorney.
- 5. Mail the original declaration with attachments to the Assessor's office at the address shown.

| 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 and correct to the best of my knowledge and belief. | | | | | | |
| SIGNATURE OF DECLARANT | DATE | | | | | |

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

