263-B-R03-0519-25000294-1 BOE-263-B (P1) REV. 03 (05-19) LESSEES' EXEMPTION CLAIM Declaration of property information as of 12:01 a.m., January 1, 20 PROPERTY USED EXCLUSIVELY FOR PUBLIC = COLLEGES, STATE COLLEGES, STATE UNIVER UNIVERSITY OF CALIFORNIA [Revenue and Taxation	SITIES, OR	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
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing a	address)	
L		To receive the full exemption, this claim mus be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		
LESSEE'S CORPORATE OR ORGANIZATION NAME		
MAILING ADDRESS		
CITY, STATE, ZIP CODE		
CORPORATE ID (IF ANY)		
ADDRESS OF PROPERTY (NUMBER AND STREET)		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the prima	ary and incidental qualifying uses of t	be property
The exemption claim is made for the following propert	ty: (if there are numerous propertie	s, please attach a list that clearly identifies the
	property and the name and add	ress of the lessee)
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
Buildings and Improvements		
Personal Property		
	of real or personal property owned by	oossession and use of the property? a public school, community college, state college, munity college, state college, state university, or
Yes No Does the claimant own personal prop	perty used at this property for public	school purposes?
Note: If requested by the assessor, the claimant shall	l provide a copy of the lease or agree	ement.
	CERTIFICATION	
I certify (or declare) under penalty of perjury under the accompanying statements or do	e laws of the State of California that i ocuments, is true and correct to the b	
SIGNATURE OF PERSON MAKING CLAIM		DATE
NAME OF PERSON MAKING CLAIM		TITLE
E-MAIL ADDRESS		