EF-571-M-R06-0806-27000739-1 BOE-571-M (FRONT) REV. 6 (8-06)

_ MISCELLANEOUS PROPERTY STATEMENT

OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20 ____. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.



Xochitl Marina Camacho Monterey County Assessor

P. O. Box 570

2. LOCATION OF THE PROPERTY:

Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

(File a separate statement for each location)

ode section 408. Attached schedules are considered to be part of the statement.				Street Address			
. NAME AND MAILING ADDRESS (Make necessary co	rrections to the printed name	and mailing address.)			ity		
3. DC				O YOU OWN THE LAND AT THIS LOCATION? Yes No yes, is the name on your deed corded as shown on this statement. Yes No			
				LOCAL PHONE NUMBER			
				E-Mail Address (optional)			
L			I	TERANS:		,	
angible property owned, claimed, possessed, controlled	l or managed by you at this le	ocation at 12:01 a.m. Janu		Are you filing a claim for vete	rans exemption?		
ne year being reported. Inventories are exempt from to	axation and should not be rep	ported for 1980 and futu		If yes, a separate "Claim for Ve	terans' Exemptio	n" form must be filed	
o not report property eligible for this exemption.				with Assessor on or before Fe		rommase se mea	
DESCRIPTION OF PROPERTY		COST		REMARKS ASSESSOR'S USE ONLY			
5. SUPPLIES		X				OJE ONEI	
6. EQUIPMENT		X XXXX					
a. Total cost of all equipment held on January 1, last year							
a. Total cost of all equipment neid on January 1, la	st year X X X X	^					
b. Equipment acquired since January 1, last year	XXX	x xxxx					
c. Equipment disposed of since January 1, last yea	r XXX	X X X X					
d. Total cost of all equipment held on January 1, this year		X					
7. OTHER (describe)							
8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail)	MONTH & Y	'EAR					
NSTRUCTIONS:				TOTAL FULL			
ine 5. Enter the cost of your supplies.			VALUE				
ine 6. List individually items acquired or disposed of sinc be entered on line d may be computed by adding ine 7. Enter the date acquired, cost, and description of a	subtracting the figure for line c.		PERSONAL PROPERTY				
tached.		ŕ	FIXTURES				
ine 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvement the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6.				(IMPROVEMENTS)			
DECLARATION BY ASSESSEE				PROCESSING DATA			
OWNERSHIP Note: The following declaration must be completed and				OPERATION	BY	DATE	
TYPE (4) signed.	result in penalties.		ANALYZED				
roprietorship I declare under penalty of perjury under the laws of the State of California that I							
have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is				COMPUTED			
pration true, correct, and complete and includes all property required to be reported				APPRAISED			
which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20				REVIEWED			
IGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	DATE		POSTED TO:				
•							
IAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)		TITLE					
IAME OF LEGAL ENTITY (other than DBA) (typed or printed)		FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE:			
		TEDENTE LIVII EOTEN ID NOMBEN					
REPARER'S NAME AND ADDRESS (typed or printed)	TITLE		BUS. CODE:				
	, ,						

*Agent: see back for Declaration by Assessee instructions.

THIS STATEMENT SUBJECT TO AUDIT



DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.