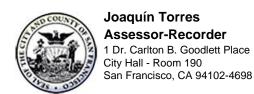
EF-263-A-R07-0617-38000558-1 BOE-263-A (P1) REV. 07 (06-17)

QUALIFIED LESSORS' EXEMPTION CLAIM

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS AND **USED EXCLUSIVELY FOR** PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, AND NONPROFIT COLLEGES

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



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To receive one time reporting treatment

	for the exemption, this claim must be filed with the Assessor within 120 days of the			
commencement date of the lease.				
NTIFICATION OF APPLICANT				
LESSOR'S CORPORATE OR ORGANIZATION NAME				
MAILING ADDRESS				
CITY, STATE, ZIP CODE				
CORPORATE ID (IF ANY)				
NTIFICATION OF PROPERTY				
ADDRESS OF PROPERTY (NUMBER AND STREET)				FISCAL YEAR OF CLAIM 20 20
CITY, COUNTY, ZIP CODE ASSESSOR'S				CEL NUMBER
USE OF PROPERTY Check and state the	primary and incidental qualifying	uses of the prop	pertv.	
The exemption claim is made for the following pr		properties, pleas	e attach a list that clea	rly identifies the
PROPERTY TYPE	INCIDENTAL USE			
Land				
☐ Buildings and Improvements				
Personal Property				
Yes No The lease confers upon the less	see the exclusive right to posses	sion and use of t	he property.	
Yes No As used herein a qualifying ins community college, state college	stitution is one whose property one, state university, University of			
Yes No The lessee institution has the control (one dollar) or any other nomina		m of acquiring th	e above property desc	ribed in the lease for \$
Important: A lessee's affidavit, in which the less will result in denial of one time reporting treatme				ete the lessee's affidavi
	CERTIFICATIO	N		
I certify (or declare) under penalty of perjury und accompanying statements	der the laws of the State of Califo s or documents, is true and corre	rnia that the fore	going and all information	on hereon, including ang
SIGNATURE OF PERSON MAKING CLAIM		DATE		
NAME OF PERSON MAKING CLAIM		TITLE		
EMAIL ADDRESS			DAYTIME TELEPHON	IE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF OUR LEVINO LEGO	AFFIDAVII FOR EXECT	UTION BY QUA	ALIFYING INSTITUTION	UNAL LESSEE		
NAME OF QUALIFYING LESS	EE INSTITUTION					
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
✓ Check the type of qua	alifying use of the property					
☐ FREE PUBLIC LIBRARY ☐ COMMUNIT		COLLEGE UNIVERSITY OF CALIFORNIA				
☐ FREE MUSEUM ☐ STATE COL		EGE NONPROFIT COLLEGE				
☐ PUBLIC SCHOOL ☐ STATE UNIV		/ERSITY				
NAME OF LESSOR						
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
COMMENCEMENT DATE OF LEASE		DATE PROPERTY PUT TO EXEMPT USE				
	ΡΙ ΕΔΩΕ ΔΤΤ		 F THE LEASE AGREEM	ENT .		
	I LLAGE ATT	ACITA COL I OI	THE LEASE AGNEEM	LIVI		
The following property is etc. Attach a separate list		year. If personal p	property is being leased, in	ndicate the type, make, model, serial number,		
PROPERTY TYPE (REAL OR PERSONAL)		PROPERTY DESCRIPTION				
(NEXTERNATE)						
		4 4la a a a a a 4 4la a 1 a		shows are and described in the lease for MA		
	ar) or any other nominal sum.	t the end of the le	ease term of acquiring the	above property described in the lease for \$1		
		CERTIFIC	CATION			
	r penalty of perjury under the loompanying statements or doc			oing and all information hereon, including any y knowledge and belief.		
SIGNATURE OF PERSON MAKING	CLAIM			DATE		
NAME OF PERSON MAKING CLAIM				TITLE		
EMAIL ADDRESS				DAYTIME TELEPHONE		
LIVIALADDINEGO				/		

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