EF-264-AH-R13-0522-39000213-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ___. (Example: a person filing a t imely claim in J anuary 2011 would enter "2011-2012.")



Steve J. Bestolarides Assessor-Recorder-County Clerk

San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273 Exemptions: (209) 468-2646 https://www.sjgov.org/department/assessor

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000213-1	/>/===
3 (05-22)	(S/ A)
PTION CLAIM	
fiscal year 20 20	CALIFOR
ng a timely claim in Tanuary 2011	

Th	is claim must be filed by 5:00 p.m., Fel	oruary 15.					
	CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)			FOR ASSESSOR'S USE ONLY			
	make necessary corrections to the printed ham	e and maining address)	Received by _				
				(Assessi	or's designee)		
			of	(cou	inty or city)		
				(004	nty or oity)		
	L		on		(date)		
If y	ou no longer seek an exemption at this lo	ocation, check here \square Sign and retu	ırn this form to the	Assessor. Da	te vacated		
NIAI	ME OF CLAIMANT						
INAI	WE OF CLAIMANT						
TIT	LE OF CLAIMANT				DAYTIME TELEPH	ONE NUMBER	
					()		
CO	RPORATE NAME OF THE COLLEGE						
ADI	DRESS (Street, City, County, State, Zip Code)						
	(, 3, , . ,						
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION				DATE PROPERTY WAS FIRST USED BY CLAIMANT			
1. (Owner and operator: (check applicable bo	oxes)					
(Claimant is:	Owner only Operator only	У				
i	and claims exemption on all	☐ Buildings and improvements	and/or	Personal prope	erty		
2. I	Does the above institution qualify as a co	llege or seminary of learning under the	ne laws of the Sta	te of California	?		
	YES NO						
3. I	ls the institution conducted as a non-profi	t entity?					
	YES NO	,					
<u>4</u> I	Does the institution require for regular ad	mission the completion of a four-year	r high school cour	se or its equiva	alent?		
7. 1	YES NO	mission the completion of a lour-year	riigii scrioor cour	se of its equive	ilent:		
	Does the institution confer upon its gradua and sciences, or on a course of at least th						
	veterinary medicine, pharmacy, architectu			,,,,		,, ogoog	
	YES NO						
6. I	ls the property for which the exemption is	claimed used exclusively for the pu	irposes of educati	on?			
	YES NO		•				
	ist all buildings and other improvements sheet if necessary. Indicate whether leas						
,						Jei.	
	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE	——————————————————————————————————————		
					LEASE		
					LEASE		
					LEASE	\square OWN	
Ī					LEASE	\square OWN	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM