EF-263-A-R07-0617-49000236-1 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)



Deva Marie Proto Sonoma County Clerk-Recorder-Assessor

Rm 104 Fiscal Bldg 585 Fiscal Dr. Santa Rosa, CA 95403-2872 TELEPHONE: (707) 565-1888 FAX: (707) 565-3317

To receive one time reporting treatment

		with the Assessor within 120 days of the					
L			commencement date of the lease.				
ENTIFICATION O	FAPPLICANT						
LESSOR'S CORPO	DRATE OR ORGANIZATION NAME						
MAILING ADDRES	S						
CITY, STATE, ZIP (CODE						
CORPORATE ID (II	FANY)						
ENTIFICATION O	F PROPERTY						
ADDRESS OF PRO		FISCAL YEAR OF CLAIM 20 20					
CITY, COUNTY, ZIF	CODE		ASSESSOR'S PARC	EL NUMBER			
	_	primary and incidental qualifying roperty: (if there are numerous property and the name	properties, please atta		y identifies the		
F	PROPERTY TYPE	PRIMARY USE		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 the pro	pperty.			
☐ Yes ☐ No	As used herein a qualifying institution is one whose property qualifies for the free public library, free museum, public school, community college, state college, state university, University of California, or nonprofit college property tax exemption.						
☐ Yes ☐ No	No The lessee institution has the option at the end of the lease term of acquiring the above property described in the lease for \$1 (one dollar) or any other nominal sum.						
		ee attests to the above statemen nt for the exemption. A separate			te the lessee's affidavit		
		CERTIFICATIO	N				
I certify (or decla		ler the laws of the State of Califo s or documents, is true and corre					
SIGNATURE OF PER	SON MAKING CLAIM		DATE				
NAME OF PERSON M	IAKING CLAIM		TITLE				
EMAIL ADDRESS			DAYTIME TELEPHONE				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF QUALIFYING LESS	EE INSTITUTION	7011011 B1 Q0				
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
Check the type of qua	lifying use of the property					
FREE PUBLIC LIBRARY		☐ COMMUNIT	Y COLLEGE	UNIVERSITY OF CALIFORNIA		
☐ FREE MUSEUM		☐ STATE COLLEGE		☐ NONPROFIT COLLEGE		
☐ PUBLIC SCHOOL		☐ STATE UNIVERSITY				
NAME OF LESSOR						
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
COMMENCEMENT DATE OF LEASE			DATE PROPERTY PUT TO EXEMPT USE			
	PI FASE AT	TACH A COPY OF	 F THE LEASE AGREE	THE LEASE AGREEMENT		
	T ELFROL TRI	17.0117.001 1 01	THE LEMOE MORKEE	VI_IVI		
The following property is letc. Attach a separate list PROPERTY TYPE (REAL OR PERSONAL)	PE PROPERTY DESCRIPTION					
	ee institution has the option ar) or any other nominal sum		ease term of acquiring the	ne above property described in the lease for \$1		
		CERTIFIC	CATION			
	penalty of perjury under the ompanying statements or do			going and all information hereon, including any my knowledge and belief.		
SIGNATURE OF PERSON MAKING				DATE		
NAME OF PERSON MAKING CLAIR	И			TITLE		
EMAIL ADDRESS				DAYTIME TELEPHONE ()		

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