				KATH	IY SCRIVEN	
EF-263-A-R07-0617-51000423-1 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		S		SUTTER COUNTY / 1190 Civic Center Blvd. Yuba City, CA 95993 Phone: (530) 822-7160 F		ax: (530) 822-7198 sessor
				www.suttercounty.org/ass E-mail: assessor@co.sutte		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and r Г	mailing address)					
L		f V	or the exe	mptior ssesso	time reporting n, this claim m or within 120 c late of the lease	ust be filed lays of the
IDENTIFICATION OF APPLICANT						
LESSOR'S CORPORATE OR ORGANIZATION NAME						
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
CORPORATE ID (IF ANY)						
IDENTIFICATION OF PROPERTY						
ADDRESS OF PROPERTY (NUMBER AND STREET)						FISCAL YEAR OF CLAIM
CITY, COUNTY, ZIP CODE					ASSESSOR'S PARC	EL NUMBER
USE OF PROPERTY V Check and state the	primary and incidental o	ualifving us	ses of the pro	opertv		
The exemption claim is made for the following p		merous pro	operties, plea	ase atta		ly identifies the
PROPERTY TYPE	PRIMAR	RY USE			INCIDENT	ALUSE
Land						
Buildings and Improvements						
Personal Property						
Yes No The lease confers upon the less	see the exclusive right to	possessic	n and use of	f the pro	operty.	
Yes No As used herein a qualifying ins community college, state colleg						
Yes 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.						
Important: A lessee's affidavit, in which the lessee attests to the above statement(s) is provided. Failure to submit/complete the lessee's affidavit will result in denial of one time reporting treatment for the exemption. A separate affidavit is required of each lessee.						
CERTIFICATION						
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.						

SIGNATURE OF PERSON MAKING CLAIM	DATE
NAME OF PERSON MAKING 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 LESSEE INSTITUTION						
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
$\boxed{\checkmark}$ Check the type of qualifying use of the pro	perty					
FREE PUBLIC LIBRARY		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				
PLEA	ASE ATTACH A COPY OF THE LEASE AGREI	EMENT				

The following property is leased as of January 1 of this year. If personal property is being leased, indicate the type, make, model, serial number, etc. Attach a separate listing if necessary.

PROPERTY TYPE (REAL OR PERSONAL)	PROPERTY DESCRIPTION

Yes 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.

CERTIFICATION					
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true and correct to the best of my knowledge and belief.					
SIGNATURE OF PERSON MAKING CLAIM	DATE				
NAME OF PERSON MAKING CLAIM	TITLE				
EMAILADDRESS	DAYTIME TELEPHONE				
	()				
THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION					

