EF-261-D-R02-0810-53000161-1 BOE-261-D (P1) REV. 02 (08-10)

SERVICEMEMBER NAME

RANK

SERVICEMEMBERS CIVIL RELIEF ACT DECLARATION

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.

ORGANIZATION



SOCIAL SECURITY OR SERIAL NUMBER

Shanna White County Clerk-Recorder-Assessor

DAYTIME TELEPHONE NUMBER

E-MAIL ADDRESS

DATE

Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

P.O. Box 1255

MAILING ADDRESS		1	CITY			STATE	ZIP CODE
LEGAL RESIDENCE ADDRESS			CITY			STATE	ZIP CODE
VOTER REGISTRATION CITY			COUNTY		STATE	YEAR LAST VOTED	
LIST BELOW ANY PERSONAL	PROPE	RTY OR MANU	JFACTURED	HON	ME LOCATED	IN CAL	JFORNIA.
		PERSONAL PR	OPERTY				
PROPERTY TYPE	DESCRIPTION				SERIAL/ID NUMBER		
		MANUEACTUR	TD LIONE				
		MANUFACTURE			5-544	.==	
MANUFACTURER		YEAR OF MANUFACTURE			DECAL/SERIAL NUMBER		
INSTRUCTIONS:							
1. List personal property by type, descri	ption, a	nd serial numbe	er or ID numb	oer.			

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

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

Sign and date the declaration. If you are signing this document with Power of Attorney, attach a copy of the document

2. Enter the manufacturer, year of manufacture, and decal or serial number of a manufactured home.

Mail the original declaration with attachments to the Assessor's office at the address shown.

accompanying statements or documents, is true and correct to the best of my knowledge and belief.



SIGNATURE OF DECLARANT

Attach a copy of your current leave and earnings statement.

through which you have been granted the Power of Attorney.