EF-270-AH-R05-0810-53000448-1 BOE-270-AH REV. 05 (08-10)

Assessor by February 15.

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

FROM PROPERTY TAXES

To receive the full exemption, a claimant must complete and file this form with the



Shanna White County Clerk-Recorder-Assessor

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE,	, ZIP CODE)				
ADDRESS OF EXHIBITION (STREE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL	PROPERTY FOR WHICH I	EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
I hereby state that:				1	
(c) The property	nove the property from the state is subject to taxation in some of country have been paid.	•		l all current taxes due in the	
			Whom should we contact during normal business hours for additional information?		
FOR A	SSESSOR'S USE ONLY	NAME	NAME		
		ADDRESS (STR	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(· · · · · · · · · · · · · · · · · · ·				
(county or city)		DAYTIME PHON	DAYTIME PHONE NUMBER		
on	n(date)		E-MAIL ADDRESS		
		CERTIFICATION			
	under penalty of perjury under t				
including any acco	ompanying statements or docur	ments, is true, correct an	d complete to the best of my	knowledge and belief.	
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	

