EF-270-AH-R05-0810-55000145-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

Received by _____

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.



Kaenan Whitman Tuolumne County Assessor-Recorder

2 South Green Street, Third Floor Sonora, CA 95370 Phone: (209) 533-5535 Fax: (209) 533-5674

Whom should we contact during normal business hours for additional information?

Email: assessor@tuolumnecounty.ca.gov

ADDRESS (S	STREET, CITY, STATE, ZIF	P CODE)				
ADDRESS O	F EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED						
D	ESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.						
3.						
4.						
5.						
hereby	state that:					
(a)		brought into this state exclu , scientific, educational, relig				
(b)	I intend to remo	tend to remove the property from the state following its use or exhibition here;				
(c)		subject to taxation in some opuntry have been paid.	other state or a foreign cou	untry while in this state, and	all current taxes due in the	

CERTIFICATION

NAME

ADDRESS (STREET, CITY, STATE, ZIP CODE)

DAYTIME PHONE NUMBER

E-MAIL ADDRESS

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, correct and complete to the best of my knowledge and belief.

SIGNATURE OF PERSON MAKING CLAIM	TITLE	DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



FOR ASSESSOR'S USE ONLY

(county or city)