r-262-AH-R07-0512-57000805-1 DE-262-AH (P1) REV. 07 (05-12) CHURCH EXEMPTION PROPERTY USED SOLELY FOR RELIGIOUS WORSHIP This claim is filed for fiscal year 20 20	County of Volo	JOEL BUTLER YOLO COUNTY ASSESSOR 625 Court St, Rm. 104 Woodland, CA 95695 Woodland/Davis (530) 666-8135 Fax (530) 666-8213 West Sacramento (916) 375-6496 www.yolocounty.org
(Example: a person filing a timely claim in January 2011 would enter "2011-2012.")		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) □	7	FOR ASSESSOR'S USE ONLY
		Received
		Reason for denial
L		
To receive the full exemption, this claim me	ust be filed with the A	ssessor by February 15.
NAME OF CHURCH, ORGANIZATION, ETC.		
WEBSITE ADDRESS (IF ANY)		
WEBSITE ADDRESS (IF ANY)		
MAILING ADDRESS (NUMBER AND STREET/P. O. BOX)		
CITY, STATE, ZIP CODE		
ADDRESS OF PROPERTY (NUMBER AND STREET)		ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		DATE PROPERTY WAS FIRST USED BY CLAIMANT
 Owner and operator: (check applicable boxes) Claimant is: Owner and operator Owner only Operator Our of the second operator Owner only Operator Our of the second operator Owner only Operator Operator	vements and/or	Personal property any building in the course of construction?
3. Is the land claimed as exempt required for the convenient use of the	ese buildings?	
Yes No		
4. Is all real property used by the church upon which exemption is c parking of automobiles of persons attending or engaged in religio commercial purposes?		
Yes No		
Commercial purposes does not include the parking of vehicles or bi costs of operating and maintaining the property for parking purposes if the congregation of the church, religious congregation, or sect is r	. Leased property used for	parking purposes is eligible for exemption only
5. List all uses of the property:		
6. a. Is an elementary school and/or secondary school being operated	at this location?	
Yes No		
b. Is a children's day care center being operated at this location (a and infant care centers)?	children's day care center	includes licensed nursery schools, preschools,
Yes No		
Note: If the answer is YES to a. or b. above, the property is not eligible church and used for religious worship, preschool purposes, nursery schu grade (grades 1 - 12), or for the purposes of both schools of collegiate gr Religious Exemption. The Religious Exemption has a "one-time filing" claimant may wish instead to annually file by February 15 for the Welfare	ool purposes, kindergarten p ade and schools of less than provision and should be f	ourposes, school purposes of less than collegiate collegiate grade, the claimant may qualify for the

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7. Is the real property listed on this claim owned by the church?

Yes No If NO, state the name and address of owner:

OWNER NAME	e the name and address of owner:			
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)		CITY, STATE, ZIP CODE	
Yes No If YES, is Yes Yes Note: The benefit of a prothat the church exemption payments, or a refund of su	n is taken into account in fixing the uch payments, if paid, for each month	ereof, so used is not eli church; if the lease terms of agreement, of occupancy (or use)	gible for exemption. or rental agreement does not specifically prov , the church shall receive a reduction in re , or portion thereof, during the fiscal year equa	ntal
 9. Are bingo games being ope each year for the property, o Yes No 10. Is any portion of this prope Yes No Note: Living quarters are r Exemption. Contact the Ass 	r portion of the property so used, to be e rty being used for living quarters for any not eligible for the Church or Religious essor.	for the Welfare Exempt exempt. r person? If YES, descr	tion must be filed with the Assessor by February	
11. Is any portion of this proper	rty vacant and/or unused? escribe that portion:			
since 12:01 a.m., January	1 last year?		some person or organization other than the claim	iant
MAILING ADDRESS (NUMBER A	ND STREET/P. O. BOX)		CITY, STATE, ZIP CODE	
the user/operator both file a 13. Has there been any chang since 12:01 a.m., January ☐ Yes ☐ No If YES, de	claim for the Welfare Exemption. Contac ge in the use of the property or any con 1 last year? escribe:	ct the Assessor. Istruction commenced		and
Yes No If YES, lis listed is no		nd the type, make, mod please state the other ι	el, and serial number of the property. If the prop uses of the property <i>(attach schedule as necessa</i>	· · ·
NAME	in should we contact during horman		TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS			
	CERTII	FICATION		
l certify (or declare) under pen	alty of periury under the laws of the Stat	e of California that the	foregoing and all information hereon, including	anv

accompanying statements or documents, is true, correct, and complete to the best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM

DATE

NAME OF PERSON MAKING CLAIM

