EF-264-AH-R13-0522-01000122-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM This claim is filed for fiscal year 20

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Phong La ALAMEDA COUNTY ASSESSOR

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1221 Oak St., Rm 145 Oakland, Ca. 94612-4288 (510) 272-3787 / FAX (510) 272-3803 www.acgov.org/assessor

(Example: a per would enter "20	rson filing a t imely claim in Ja 11-2012.")	anuary 2011					
This claim must be filed by 5:00 p.m., February 15. CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)				FOR ASSESSOR'S USE ONLY Received by			
L			_	on	y or city) date)		
NAME OF CLAIMA	ANT	cation, check here Sign an	nd retui	rn this form to the Assessor. Date	e vacated:	ONE NUMBER	
•	t, City, County, State, Zip Code) RCEL NUMBER OR LEGAL DESC	RIPTION		DATE PROPERTY	YWAS FIRST USE	D BY CLAIMANT	
Claimant is: and claims e 2. Does the abo YES	operator: (check applicable be Owner and operator exemption on all Land ove institution qualify as a co NO tion conducted as a non-profit NO	Owner only Operate Buildings and improvement lege or seminary of learning un	ents	and/or ☐ Personal proper se laws of the State of California?			
YES5. Does the inst and sciences	NO titution confer upon its gradua s, or on a course of at least th	tes at least one academic or pro	ofessio	high school course or its equivalent and degree, based on a course of a chas law, theology, education, ments	at least two year	rs in liberal arts y, engineering	
6. Is the proper	rty for which the exemption is	claimed used exclusively for t	the pu	rposes of education?			
				tate the primary and incidental useclaim form for each Assessor			
BUILDI	ING & IMPROVEMENTS	PRIMARY USE		INCIDENTAL USE			
					LEASE	OWN	
					LEASE		
					LEASE		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



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

TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM