EF-264-AH-R13-0522-01000113-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

Phong La ALAMEDA COUNTY ASSESSOR

LEASE

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

This claim is filed for fiscal year 20 - 20 (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")

This claim must be filed by 5:00 p.m., Feb	ruary 15.			
CLAIMANT NAME AND MAILING ADDRESS	and mailing address)	FOR ASSESSOR	'S USE ONLY	,
(Make necessary corrections to the printed name	and mailing address)	Received by	to decision and	
		(Assessor :	's designee)	
		Of(county	y or city)	
		on		
L	_	(0	date)	
If you no longer seek an exemption at this loo	cation, check here Sign and retu	ırn this form to the Assessor. Date	vacated:	
NAME OF CLAIMANT	116			
TITLE OF CLAIMANT)	ONE NUMBER
CORPORATE NAME OF THE COLLEGE			_	
ADDRESS (Street, City, County, State, Zip Code)	A A A I			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESCRIPTION	RIPTION	DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT
Owner and operator: (check applicable bo)	(xes)			
	☐ Owner only ☐ Operator onl	y		
and claims exemption on all Land	☐ Buildings and improvements	and/or Personal propert	У	
Does the above institution qualify as a coll YES NO	lege or seminary of learning under t	ne laws of the State of California?		
3. Is the institution conducted as a non-profit YES NO	entity?			
Does the institution require for regular adm YES NO	nission the completion of a four-yea	r high school course or its equivale	ent?	
5. Does the institution confer upon its graduat	es at least one academic or profession	onal degree, based on a course of a	at least two year	rs in liberal arts
and sciences, or on a course of at least the veterinary medicine, pharmacy, architecture			dicine, dentistr	y, engineering
YES NO	re, line arts, commerce, or journalish			
6. Is the property for which the exemption is	alaimed used evaluaively for the pu	urnages of advection?		
YES NO	cialined used exclusively for the po	irposes of education?		
7. List all buildings and other improvements is sheet if necessary. Indicate whether lease				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
			LEASE	OWN

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