EF-264-AH-R13-0522-01000057-1

would enter "2011-2012.")

Phong La ALAMEDA COUNTY ASSESSOR

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

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BOE-264-AH (P1) REV. 13 (05-22) **COLLEGE EXEMPTION CLAIM** This claim is filed for fiscal year 20 - 20 (Example: a person filing a timely claim in January 2011

This claim must be filed by 5:00 p.m., Fel	bruary 15			
CLAIMANT NAME AND MAILING ADDRESS		FOR ASSESSOR'S USE ONLY		
(Make necessary corrections to the printed nam	e and mailing address)	Received by		
		(Assessor's	s designee)	
		of(county		
		(county	or city)	
L	_	on	ate)	
If you no longer seek an exemption at this lo	ocation, check here 🗌 Sign and retu	urn this form to the Assessor. Date	vacated:	
NAME OF CLAIMANT		10		
TITLE OF CLAIMANT	7/3		AYTIME TELEPH	ONE NUMBER
CORPORATE NAME OF THE COLLEGE			_	
ADDRESS (Street, City, County, State, Zip Code)	^ A / / I			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY	WAS FIRST USE	D BY CLAIMANT
1. Owner and operator: (check applicable be Claimant is:			_ =	
_ '	_ ,	_	.,	
and claims exemption on all Land		and/or Personal propert	У	
2. Does the above institution qualify as a co	llege or seminary of learning under t	he laws of the State of California?		
3. Is the institution conducted as a non-profi	it entity?	V U I		
4. Does the institution require for regular ad YES NO	mission the completion of a four-year	r high school course or its equivale	ent?	
5. Does the institution confer upon its gradua and sciences, or on a course of at least th veterinary medicine, pharmacy, architectumy YES NO	nree y <mark>ea</mark> rs in pro <mark>fes</mark> sional studies, su	ich <mark>as law, theo</mark> log <mark>y,</mark> education, me		
6. Is the property for which the exemption is	claimed used exclusively for the pu	urposes of education?		
YES NO	,			
7. List all buildings and other improvements sheet if necessary. Indicate whether lease				
BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDENTAL USE		
			LEASE	\square OWN
			LEASE	\square OWN
			LEASE	\square OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM