F-269-FIR-R02-0308-03000168-1 OE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMPTIO ASSESSOR'S FIELD INSPECTION REPOR	Jan HL XXII	James B Rooney Assessor of Amado 810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721	or County
		T AA. (209) 223-0721	
SUPPLEMENTAL ASSESSMENT Information for Property No	Year:		
	10011		
Address of <i>this</i> property			
Owner only Operator only Owner	stre er-Operator Date of last in:	et, city, zip code) spection of property	
If claimant is operator, name of owner is			
A. Claimant is primarily: (check only one) 1. charitable 22			
B. Use of property			
1. The primary activity the property is us	sed for is: (check only one)		
 a. administration b. commercial c. educational d. farming m. other (<i>explain</i>) 	 e. fraternal and lodge meet f. fund raising g. hospital h. housing 	j. recreational k. rehabilitation l. informational	
2. Other activities the property is used			
 All or part (write in all or part where a b. vacant or unused house personnel whose presence is n 	c. in excess of that re		d. used to
 C. Operation of property for benefit of 1. In your opinion are services and expension 	persons		Yes 🗌 No
If answer is yes , explain: 2. In your opinion do operations enhance	e anyone's private gain?		Yes 🗌 No
 If answer is yes, explain: In your opinion is the claimant's propo If answer is no, explain: 	sed new capital investment, if a	any, necessary?	Yes No
D. Ownership of real property (as of applic If answer is no , explain:	able lien date) is recorded in e	xact name of claimant	🗌 Yes 🗌 No
		Did owner file an exemption claim?	🗌 Yes 🗌 No
 E. Supplemental Assessment (in claimant's 1. Date of change in ownership 		Recorded	🗌 Yes 🗌 No
Ownership in name of claimant? —— 2. Date of completion of new constructio	n		
Explain what was constructed ———— 3. Date put to exempt use		If only a portion of the p	
 Notice: date mailed Date claim for exemption from Supple 			
6. Date first installment of supplemental			
F. A claim for veterans' organization exen		•	
1. was filed last year 🗌 Yes 🗌 No		🗌 No	
3. was not filed last year, but claimed on	another property located at	(give complete address including z	in 2000)
G. Recommendation: 1. Approval		(give complete address including z	ip code) (all)
Reason for denial (if partial denial, identify	. ,		
 Date	Inspection for		

