EF-270-AH-R05-0810-03000364-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES



James B Rooney Assessor of Amador County 810 Court Street

Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

| NAME OF EXHIBITOR | | | | | |
|--|--|----------------|---|------------------------------|--------------------------------|
| ADDRESS (STREET, CITY, STATE, ZIP | CODE) | | | | |
| ADDRESS OF EXHIBITION (STREET, E | BOOTH, ETC.; BE SPECIFIC) LIST ALL PERSONAL | PROPERTY I | OR WHICH EX | EMPTION IS CLAIMED | 1 |
| DESCRIPTION | DATE ENTERED CALIFORNIA | DATE TA | XES PAID | AMOUNT OF TAXES PAID | STATE OR COUNTRY IN WHICH PAID |
| 1. | | | | | |
| 2. | | Λ | | | |
| 3. | 74 | | | | _ |
| 4. | | | | | |
| 5. | | | | | |
| exhibit of literary state; (b) I intend to remove (c) The property is s | r, scientific, educational, religive the property from the state | ious, or artis | tic works in this use or exhib r a foreign cou | is state and is used only fo | |
| FOR ASSESSOR'S USE ONLY | | | NAME | | |
| Received by | (Assessor's designee) (county or city) | | ADDRESS (STREE | ET, CITY, STATE, ZIP CODE) | |
| on(date) | | | E-MAIL ADDRESS | | |
| CERTIFICATION | | | | | |
| I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief. | | | | | |
| SIGNATURE OF PERSON MAKING CL | AIM | | TITLE | | DATE |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION