EF-270-AH-R05-0810-04000264-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

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



Alyssa Douglass Butte County Assessor

25 County Center Dr Suite 100 Oroville, CA 95965-3382 (530)538-7721 Fax (530) 538-7991

Email: assessorsoffice@buttecounty.net Website: www.buttecounty.net/assessor

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, Z	IP CODE)				
ADDRESS OF EXHIBITION (STREET)	BOOTH, ETC.: BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
		- 1/ 			
4.					
E					
5.					
I hereby state that:					
	s br <mark>ou</mark> ght into <mark>thi</mark> s <mark>sta</mark> te exclus				
	ry, <mark>sci</mark> entific, e <mark>du</mark> cat <mark>io</mark> nal, religio	ous, or artistic works in thi	s st <mark>ate</mark> and is used only for t	these purposes while in this	
state;					
	ove the property from the state	-			
	subject to taxation in some of	ther state or a foreign cou	intry while in this state, and	all current taxes due in the	
otner state or c	ountry have been paid.				
			Whom should we contact d	uring normal	
			usiness hou <mark>rs</mark> for additiona		
FOR AS	SESSOR'S USE ONLY	NAME			
		ADDRESS (STREE	T, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(, 1888888, C 48889, 1889)				
(county or city)		DAYTIME PHONE N	DAYTIME PHONE NUMBER		
on		()	()		
	(date)	E-MAIL ADDRESS			
		CERTIFICATION			
I certify (or declare) un	der penalty of perjury under th	e laws of the State of Cal	ifornia that the foregoing an	d all information hereon.	
	npanying statements or docum				
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	

