EF-261-D-R02-0810-13000393-1 BOE-261-D (P1) REV. 02 (08-10)

SERVICEMEMBER NAME

SERVICEMEMBERS CIVIL RELIEF ACT DECLARATION

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.

Robert Menvielle Imperial County Assessor 940 W. Main Street Suite 115

El Centro, CA 92243 Main Office: (442) 265-1300 Website: assessor.imperialcounty.org

DAYTIME TELEPHONE NUMBER

DATE

| RAN | K | ORGANIZATION | SOCIAL SECURITY | OR SERIAL NUMBER | E-MAIL ADDRESS | | |
|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------|------------------|------------------------|----|--|
| | | | | | | | |
| MAII | ING ADDRESS | | C | ITY | STATE ZIP CODE | | |
| | | | | | | | |
| LEG | AL RESIDENCE ADDRESS | | С | ITY | STATE ZIP CODE | | |
| VOT | ER REGISTRATION CITY | | | OUNTY | STATE YEAR LAST VOTI | ED | |
| LIST BELOW ANY PERSONAL PROPERTY OR MANUFACTURED HOME LOCATED IN CALIFORNIA. | | | | | | | |
| | | | PERSONAL PROP | PERTY | | | |
| | PROPERTY | TYPE | DESCRIPTIO | | SERIAL/ID NUMBER | | |
| | THOI ENTI | | BEGORN 110 | | SERVICE TO WISE IN | | |
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| MANUFACTURED HOME | | | | | | | |
| | MANUFA | CTURFR | YEAR OF MANUFA | _ | DECAL/SERIAL NUMBER | | |
| | | 0.011211 | T E J III O I J III II VOIV | | BEGINE GEING EINGMBEIN | | |
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| INS | STRUCTIONS: | | | | | | |
| List personal property by type, description, and serial number or ID number. | | | | | | | |
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| 2. | · · · · · · · · · · · · · · · · · · · | | | | | | |
| 3. | Attach a copy of your current leave and earnings statement. | | | | | | |
| 4. | Sign and date the declaration. If you are signing this document with Power of Attorney, attach a copy of the document through which you have been granted the Power of Attorney. | | | | | | |
| 5. | 5. Mail the original declaration with attachments to the Assessor's office at the address shown. | | | | | | |

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 and correct to the best of my knowledge and belief.

SIGNATURE OF DECLARANT