EF-270-AH-R05-0810-20000142-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

O ERA COUL

Madera County Assessor 200 West 4th Street Madera, CA 93637-3548

Brett Frazier

Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

www.maderacounty.com/government/assessor

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, ZIF	P CODE)				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0022,				
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.		\			
4.		VIII			
5.					
L baraby state that:					
I hereby state that:	brancht into this state evalu		an avhibition at an avna	itian fair carrival ar nublic	
	br <mark>ou</mark> ght into <mark>thi</mark> s state exclu , scientific, educational, relig				
state;	, odientino, educational, reng	iode, or drugge works in an	o otate and to accuromy for	these purposes write in this	
(b) I intend to remove	ve the property from the state	e following its use or exhib	ition here;		
(c) The property is	subject to taxation in some of	other state or a foreign cou	intry while in this state, and	I all current taxes due in the	
other state or country have been paid.					
Whom should we contact during normal					
			usiness hours for additiona		
FOR ASSESSOR'S USE ONLY					
		ADDRESS (STREE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by		ABBILESS (STALL	7.55.1250 (0.7.121., 0.7.1.2, 2.1. 0052)		
Treceived by	(Assessor's designee)				
of					
(county or city)		DAYTIME PHONE N	DAYTIME PHONE NUMBER		
ON(date)		E-MAIL ADDRESS	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.					
moduling any accomp	parrying statements or docum	nonio, is true, correct ariu (complete to the best of fifty	Milowicage and Deliel.	
SIGNATURE OF PERSON MAKING CL	AIM	TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

