EF-571-M-R06-0806-20000278-1 BOE-571-M (FRONT) REV. 6 (8-06)

## \_\_ MISCELLANEOUS PROPERTY STATEMENT

## OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20\_\_\_\_. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached checkulas are considered to be a factor of the control of the contro



## **Brett Frazier Madera County Assessor**

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

2. LOCATION OF THE PROPERTY:

www.maderacounty.com/government/assessor

ado soction 100. Attached schodules are considered to be part of the statement					reet Address		
					ty		
Г	O YOU OWN THE LAND AT THIS LOCATION?						
					Yes No		
	ves, is the name on your deed corded as shown on this statement. Yes No						
					OCAL PHONE NUMBER(		
					Mail Address (optional)		
					RANS:  e you filing a claim for veteran	s'exemption?	
angible property owned, claimed, possesse	d, controll <mark>ed,</mark> or manage <mark>d</mark>	by you at this l	ocation at 12:01 a.m., Jar	nuary 1 of	Yes No	S Cacinption:	
ne year being reported. Inventories are exe to not report property eligible for this exem		ould not be re	ported for 1980 and futi	ure y <mark>ear</mark> s.	yes, a separate "Claim for Vetera	ns' E <mark>xempti</mark> o	n" form must be filed
o not report property engine for this even	p			W	ith Assessor on or before Febru	ary 15.	
DESCRIPTION OF PROPERTY DATI					REMARKS		ASSESSOR'S
E. CHARLIES		QUIRE					USE ONLY
5. SUPPLIES X X							
6. EQUIPMENT X X X							
a. Total cost of all equipment held on	January I, last year	X X X	٨				
			V V V V V				
b. Equipment acquired since January 1, last year X X X			X X X X			-	
c. Equipment disposed of since Janua	ry 1 last year	XXX	X XXXX				
c. Equipment disposed of since Janua	ry 1, last year	^ ^ ^	^				
d. Total cost of all equipment held on	January 1 this year	XXX	Y				
7. OTHER (describe)	January 1, this year	***	^				
BUILDINGS OR LEASEHOLD IMPROVE	MENTS.						
(describe additions and retirements in		MONTH &	YEAR				
					TOTAL FULL		
NSTRUCTIONS: ine 5. Enter the cost of your supplies.			TOTAL FULL VALUE				
ine 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c.							
ine 7. Enter the date acquired, cost, and des			PERSONAL PROPERTY				
tached. ine 8. Describe in detail and show the cost o	age or to your loseshold im	unrovements to	FIXTURES				
ine 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6.					(IMPROVEMENTS)		
DECLARATION BY ASSESSEE					PROCESSING DATA		
OWNERSHIP Note: The following declaration must be cor					OPERATION	BY	DATE
TYPE (4) signed. If you do not do so, it may result in penalties.					ANALYZED		
oprietorship					COMPUTED		
artnership $\Box$ statements or other attachments, and to the best of my knowledge and belief it is							
rporation					APPRAISED		
other as the assessee in this statement at 12:01 a.m. on January 1, 20					REVIEWED		
IGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	DATE		POSTED TO:				
IAME OF ACCEPTED A AUTHORITED ACCENTS (1)			777.5				
IAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)			TITLE				
IAME OF LEGAL ENTITY (other than DBA) (typed or printed)			FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE:		
(out danson, typed of prince)					BUS. CODE:		
REPARER'S NAME AND ADDRESS (typed or printed)  TELEPHONE NUMBER			TITLE		DOS. CODE.		
	( )						

\*Agent: see back for Declaration by Assessee instructions.

THIS STATEMENT SUBJECT TO AUDIT



## **DECLARATION BY ASSESSEE**

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

