EF-270-AH-R05-0810-23000094-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES



MENDOCINO COUNTY ASSESSOR 501 Low Gap Road, Room 1020

Ukiah, CA 95482 Telephone: (707) 234-6800 Fax: (707) 463-6597

Katrina Bartolomie

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	CODE)				
ADDRESS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC) LIST ALL PERSONAL	PROPERTY FO	OR WHICH EX	EMPTION IS CLAIMED	<u> </u>
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAX	ES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.					
2.					
3.					
4.		V			
5.					
state; (b) I intend to remove (c) The property is:	ve the property from the stat	e following its	use or exhib a foreign cou	ition here;	
FOR ASSESSOR'S USE ONLY			NAME NAME		
			ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by(Assessor's designee)					
of(county or city)			DAYTIME PHONE NUMBER		
on(date)			E-MAIL ADDRESS		
		CERTIFI	CATION		
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	TIT	LE		DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

