## 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.



## MERCED COUNTY

MATT H. MAY, ASSESSOR 2222 M STREET MERCED, CA 95340 TELEPHONE (209) 385-7631 FAX (209) 725-3956 www.co.merced.ca.us\assessor

NAME	OF EXHIBITOR								
ADDRE	ESS (STREET, CITY, STATE, ZI	IP CODE)							
ADDRE	SS OF EXHIBITION (STREET,	; BOOTH, ETC.; BE SPECIFIC)	PROPERTY	FOR WHICH EX	EMPTION IS CLAIMED	Λ			
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID			
1.									
2.		$\mathbf{C}\mathbf{\Lambda}$							
3.		NA							
4.									
5.									
<ul> <li>I hereby state that:</li> <li>(a) The property is brought into this state exclusively for purposes of use or exhibition at an exposition, fair, carnival, or public exhibit of literary, scientific, educational, religious, or artistic works in this state and is used only for these purposes while in this state;</li> <li>(b) I intend to remove the property from the state following its use or exhibition here;</li> <li>(c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the other state or country have been paid.</li> </ul>									
	FOR AS	SESSOR'S USE ONLY	usiness hou <mark>rs</mark> for additiona	al information?					
				ADDRESS (STREET, CITY, STATE, ZIP CODE)					
Received by									
of		(Assessor's designee)							
on	On			DAYTIME PHONE NUMBER					
	(date)			E-MAIL ADDRESS					
L	CERTIFICATION								
10	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 CLAIM	TITLE	DATE
		I

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

