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					
ADDRESS (STREET, CITY, STATE, ZI	P CODE)				
ADDRESS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL F	PROPERTY FOR WHICH EX	EMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.				-	
3.				-	
4.					
5.					
exhibit of literary state;	brought into this state exclu y, scientific, educational, religi	ous, or artistic works in th	is state and is used only for t		
	ve the property from the state subject to taxation in some o	•		all current taxes due in the	
	ountry have been paid.		Whom should we contact do	uring normal	
FOR ASS	SESSOR'S USE ONLY	NAME			
		ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)		NUMBER		
on	(date)	E-MAIL ADDRESS	() E-MAIL ADDRESS		
		CERTIFICATION			
L certify (or declare) und	der penalty of perjury under th		lifornia that the foregoing an	d 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			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

