EF-263-B-R02-0810-25000359-1 BOE-263-B (P1) REV. 02 (08-10)

LESSEES' EXEMPTION CLAIM

IDENTIFICATION OF APPLICANT

Declaration of property information as of 12:01 a.m., January 1, 20___.

PROPERTY **USED EXCLUSIVELY FOR PUBLIC** SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA

> NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



Cheri Budmark **Modoc County Assessor**

204 Sout Court Street, Suite 106 Alturas, CA 96101 Phone: (530) 233-6218 Fax: (530) 233-6237 assessor@co.modoc.ca.us

		n, this claim must by February 15.
be med with th	C / 10000001 D	y rebruary ro.

LESSEE'S CORPORATE OR ORGANIZATION NAME		
MAILING ADDRESS		
CITY, STATE, ZIP CODE		
CORPORATE ID (IF ANY)		
IDENTIFICATION OF PROPERTY		
ADDRESS OF PROPERTY (NUMBER AND STREET)		
CITY, COUNTY, ZIP CODE	IVII	ASSESSOR'S PARCEL NUMBER
·	ary and incidental qualifying use	
The exemption claim is made for the following property	y: (if there are num <mark>erou</mark> s prop property and the name and	
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
☐ Buildings and Improvements		
Personal Property		
Yes No Does the lease/agreement confer up	on the lessee the exclusive righ	nt to possession and use of the property?
		ned by a public school, community college, state college, or community college, state college, state university, or
Note: If requested by the assessor, the claimant shall	provide a copy of the lease or	agreement.
	CERTIFICATION	
		that the foregoing and all information hereon, including any the best of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		DATE
NAME OF PERSON MAKING CLAIM		TITLE
E-MAIL ADDRESS		DAYTIME TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

