EF-270-AH-R05-0810-26000238-1 BOE-270-AH REV. 05 (08-10)

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.



Mono County Office Of The Assessor Barry Beck, Assessor

PO Box 456 Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZI	P CODE)				
ADDRESS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)		-		
	$T \vdash H$				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.		VII			
5.					
I hereby state that:					
state; (b) I intend to remo (c) The property is other state or co	y, scientific, educational, religional to the property from the state subject to taxation in some country have been paid.	e following its use or exhibither state or a foreign cou	ition here;	all current taxes due in the	
FOR AS	SESSOR'S USE ONLY	NAME	NAME		
Received by	(Assessor's designee)	ADDRESS (STREE	T, CITY, STATE, ZIP CODE)		
Of(county or city)		DAYTIME PHONE N	DAYTIME PHONE NUMBER		
on		E-MAIL ADDRESS	E-MAIL ADDRESS		
		CERTIFICATION			
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 C	LAIM	TITLE		DATE	