	NONTEREL	Xochitl Marina Camacho
-263-B-R02-0810-27000237-1 E-263-B (P1) REV. 02 (08-10) LESSEES' EXEMPTION CLAIM Declaration of property information as of 12:01 a.m.,	E	Monterey County Assessor P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035
January 1, 20 PROPERTY USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA	1850	Fax: (831) 755-5435 assessor@co.monterey.ca.us
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)	Г	
L	L	To receive the full exemption, this claim mus be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		, , ,
LESSEE'S CORPORATE OR ORGANIZATION NAME	C	
MAILING ADDRESS	\mathbf{A}	NA
CITT, STATE, ZIP CODE		
CORPORATE ID (IF ANY)		
IDENTIFICATION OF PROPERTY		
ADDRESS OF PROPERTY (NUMBER AND STREET)	VP	ASSESSOR'S PARCEL NUMBER
CITY, COUNTY, ZIP CODE		ASSESSORS PARCEL NUMBER
USE OF PROPERTY Check and state the primary and	incidental qualifying uses of	the property.
The exemption claim is made for the following property: (if t	there are numerous propertion propertion properties and the name and additional and the name and additional	
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
Buildings and Improvements		
Personal Property		
Yes No Does the lease/agreement confer upon the	lessee the exclusive right to	possession and use of the property?
		by a public school, community college, state college, mmunity college, state college, state university, or
Note: If requested by the assessor, the claimant shall provide	e a copy of the lease or agre	eement.
	CERTIFICATION	
I certify (or declare) under penalty of perjury under the laws of accompanying statements or document		
SIGNATURE OF PERSON MAKING CLAIM		DATE

SIGNATURE OF PERSON MAKING CLAIM	DATE
NAME OF PERSON MAKING CLAIM	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

