EF-270-AH-R05-0810-27000348-1 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.



Xochitl Marina Camacho Monterey County Assessor

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZIP CODE)					
ADDRESS OF EXHIBITION (STREET, E		PROPERTY FOR WHICH EX	EMPTION IS CLAIMED	<u></u>	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN	
_	DATE ENTERED CALIFORNIA	DATE TAXES I AID	ANOUNT OF TAXLS FAID	WHICH PAID	
1.					
2.		A // /			
3.					
4.		VII			
5.					
I hereby state that:					
exhibit of literary state; (b) I intend to remove (c) The property is s	brought into this state exclusive the property from the state subject to taxation in some country have been paid.	ious, or artistic works in the efollowing its use or exhibitother state or a foreign cou	is state and is used only for the state and is used only for the state only for the state of the	these purposes while in this all current taxes due in the uring normal	
FOR ASSESSOR'S USE ONLY					
	(Assessor's designee)	ADDRESS (STREE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Of(county or city)		DAYTIME PHONE	DAYTIME PHONE NUMBER		
On(date)		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 CLAIM		TITLE		DATE	

