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, STA | TE, ZIP CODE) | | | |
| ADDRESS OF EXHIBITION (ST | REET, BOOTH, ETC.; BE SPECIFIC) | | | Л |
| | LIST ALL PERSONAL P | ROPERTY FOR WHICH EX | EXEMPTION IS CLAIMED | Δ |
| DESCRIPTION | DATE ENTERED CALIFORNIA | DATE TAXES PAID | AMOUNT OF TAXES PAID | STATE OR COUNTRY IN WHICH PAID |
| 1. | | | | |
| 2. | | | | - |
| 3. | NA I | | | - |
| 4. | | VII | | |
| 5. | | | | |
| exhibit of lit state; | rty is brought into this state exclus terary, scientific, educational, religi | ous, or artistic works in th | his state and is used only for t | on, fair, carnival, or public hese purposes while in this |
| | remove the property from the state ty is subject to taxation in some o | - | | all current taxes due in the |
| other state | or country have been paid. | | Whom should we contact do | uring normal |
| FOR | RASSESSOR'S USE ONLY | | | |
| Received by | | ADDRESS (STRE | ET, CITY, STATE, ZIP CODE) | |
| of | (Assessor's designee) | | | |
| (county or city) | | () | | |
| | (date) | E-MAIL ADDRESS | 3 | |
| | | CERTIFICATION | | |
| L certify (or declare |) under penalty of periupy under th | e laws of the State of Ca | lifornia that the foregoing an | d all information hereon |

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 | | | |
|----------------------------------|-------|------|--|--|--|
| | | | | | |
| | | | | | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

