EF-270-AH-R05-0810-29000287-1 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.



Rolf D. Kleinhans Nevada County Assessor

950 Maidu Avenue P.O. Box 599002 Nevada City, CA 95959-7902 Telephone (530) 265-1232 Fax (530) 265-9858 assessor@nevadacountyca.gov

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZIF	CODE)				
ADDRESS OF EXHIBITION (STREET,		PROPERTY FOR WHICH EX	EMPTION IS CLAIMED	<u> </u>	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN	
1.				WHICH PAID	
2.					
3.		\	<i>// </i>	-	
4.		VII			
5.					
exhibit of literary state; (b) I intend to remove (c) The property is	brought into this state exclusive the property from the state subject to taxation in some ountry have been paid.	ous, or artistic works in the following its use or exhibit ther state or a foreign could	is state and is used only for oition here;	these purposes while in this d all current taxes due in the	
FOR ASS	SESSOR'S USE ONLY	NAME	NAME		
Received by		ADDRESS (STREE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
of	(county or city)		DAYTIME PHONE NUMBER		
on	(date)		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 CL	AIM	TITLE		DATE	