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.



Peter Aldana Assessor-County Clerk-Recorder County of Riverside PO Box 751 Riverside, CA 92502-0751 Phone: (951) 955-6200 https://www.asrclkrec.com/

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZI	P CODE)				
ADDRESS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL	PROPERTY FOR WHICH I	EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
I hereby state that:					
			use or exhibition at an exposit this state and is used only for t		
(b) I intend to remo	ve the property from the state	e following its use or exh	nibition here;		
	subject to taxation in some o ountry have been paid.	other state or a foreign of	Whom should we contact de business hours for additional	uring normal	
FOR AS	SESSOR'S USE ONLY	NAME			
		ADDRESS (STR	REET, CITY, STATE, ZIP CODE)		
Received by					
	(Assessor's designee)				
of	(county or city)				
on					
(date)		E-MAIL ADDRES	E-MAIL ADDRESS		
L		CERTIFICATION			
Loortify (or doolors)	dar papalty of parium, under t	ha lawa of the State of C	Colifornia that the foregoing on	d all information barage	

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

