## 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.



Jordan Marks San Diego County Assessor 1600 Pacific Highway, Suite 103 San Diego, CA 92101 Phone: (619) 236-3771 E-mail: arcc.fgg@sdcounty.ca.gov

NAME	OF EXHIBITOR						
ADDRE	ESS (STREET, CITY, STATE, Z	IP CODE)					
ADDRE	ESS OF EXHIBITION (STREET	; BOOTH, ETC.; BE SPECIFIC)	PROPERTY FOR WI		IS CLAIMED	Λ	
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PA		NT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.							
2.		$\mathbf{C}\mathbf{\Lambda}$					
3.		NA					
4.							
5.							
	<ul><li>exhibit of literar state;</li><li>(b) I intend to remo</li><li>(c) The property is</li></ul>	s brought into this state exclu y, scientific, educational, relig ove the property from the state subject to taxation in some c ountry have been paid.	ious, or artistic wor e following its use	ks in this state a or exhibition here	nd is used only for e;	these purposes while in this	
					nould we contact d		
FOR ASSESSOR'S USE ONLY							
			ADDRE	SS (STREET, CITY, STA	TE, ZIP CODE)		
	ceived by	(Assessor's designee)					
of	(county or city)						
on	ON			E-MAIL ADDRESS			
			CERTIFICATI	ON			
10	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

