EF-571-M-R06-0806-37000219-1 BOE-571-M (FRONT) REV. 6 (8-06)

## \_ MISCELLANEOUS PROPERTY STATEMENT

## OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20\_\_\_. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.

1.	NAME AND MAILING ADDRESS	(Make necessary corrections to the printed name and mailing address.)					
	1						

## **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

equired by Code section 463. This statement is not a property of the Assessor isclosed only to the district attorney, grand jury,	OCATION OF THE PROPERTY: ile a separate statement for each location)					
ode section 408. Attached schedules are considered to	reet Address					
. NAME AND MAILING ADDRESS (Make necessary co	c and mailing address.)  City  3. DO YOU OWN THE LAND AT THIS LOCATION?  Yes No  If yes, is the name on your deed recorded as shown on this statement. Yes No					
			4. LO	CAL PHONE NUMBER	( )	
				Mail Address (optional	)	
L				RANS:  you filing a claim for	veterans' exemption	?
angible property owned, claimed, posse <mark>ssed</mark> , controll <mark>ed to be seen being reported. Inventories are exempt from to onot report property eligible for this exemption.</mark>	, or managed by you at this loxation and should not be re	ocation at 12:01 a.m., Janu ported for 1980 and futur	re y <mark>ear</mark> s. If y	Yes No yes, a separate "Claim for the Assessor on or befo		on" form must be filed
DESCRIPTION OF PROPERTY	DATE AC QUIRED	(0)		REMARKS		ASSESSOR'S USE ONLY
5. SUPPLIES	XXX	X				
6. EQUIPMENT	XXX	X X X X X				
a. Total cost of all equipment held on January 1, la	st year X X X	х				
b. Equipment acquired since January 1, last year	XXX	x x x x x				
b. Equipment dequired since surrous 17 as tyeur		A A A A A				
c. Equipment disposed of since January 1, last yea	r XXX	x x x x				
d. Total cost of all equipment held on January 1, th	nis year X X X	X				
7. OTHER (describe)	,					
8. BUILDINGS OR LEASEHOLD IMPROVEMENTS:	MONITURA	(EAD				
(describe additions and retirements in detail)	MONTH &	TEAR				
NSTRUCTIONS:				TOTAL FULL		
ine 5. Enter the cost of your supplies.		Th. 6	VALUE			
<ul> <li>List individually items acquired or disposed of sinc be entered on line d may be computed by adding ine 7. Enter the date acquired, cost, and description of ar</li> </ul>	subtracting the figure for lir	ne c.	PERSONAL PROPER	TY		
tached.			,	FIXTURES		
ine 8. Describe in detail and show the cost of all additions the buildings of your landlord during the year bein		(IMPROVEMENTS)				
		PROCESSING DATA				
OWNERSHIP Note: The TYPE (4) signed.	st be completed and result in penalties.		OPERATION	ВҮ	DATE	
3	'	ornia that I	ANALYZED .			
have examined this property statement, including accompanying schedul				COMPUTED		
orporation				APPRAISED .		
true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20						
IGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	DATE		POSTED TO:			
IAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)	TITLE					
IAME OF LEGAL ENTITY (other than DBA) (typed or printed)	FEDERAL EMPLOYER ID NUM	FEDERAL EMPLOYER ID NUMBER TAX AREA CODE:				
AMIL OF LEGAL ENTITY (other trian DBA) (typed or printed)	PLUENAL EWIPLOYER ID NOM	DLA	BUS. CODE:			
REPARER'S NAME AND ADDRESS (typed or printed)	TITLE	_	-00.000			

THIS STATEMENT SUBJECT TO AUDIT



<sup>\*</sup>Agent: see back for Declaration by Assessee instructions.

## **DECLARATION BY ASSESSEE**

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.



