EF-270-AH-R05-0810-38000219-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

Assessor-Recorder Office of the Assessor-Recorder

Joaquin Torres

1 Dr. Carlton B. Goodlett Place - Room 190 San Francisco, CA 94102 www.sfassessor.org (415) 554-5596

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

NAME OF EVUIDITOR		
NAME OF EXHIBITOR		
ADDRESS (STREET, CITY, STATE, ZIP CODE)		
ADDRESS OF EXHIBITION (STREET, BOOTH, ETC.; BE SPECIFIC)		
LIST ALL PERSONAL PROPERTY FOR WHICH 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: (a) The property is brought into this state exclusively for pexhibit of literary, scientific, educational, religious, or artistate; (b) I intend to remove the property from the state following (c) The property is subject to taxation in some other state other state or country have been paid.	istic works in this state and is used only for its use or exhibition here; or a foreign country while in this state, and whom should we contact obusiness hours for addition.	these purposes while in this d all current taxes due in the
FOR ASSESSOR'S USE ONLY		
Received by	ADDRESS (STREET, CITY, STATE, ZIP CODE) 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 CLAIM	TITLE	DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

