EF-270-AH-R05-0810-43000375-1 BOE-270-AH REV. 05 (08-10)

Ε F

T must complete and file this form with the Assessor by February 15.



Lawrence E. Stone **Santa Clara County Assessor**

Exemption Division ing, 5th Floor (408) 271-8812 org

XHIBITION EXEMPTION CLAIM	ST. ST.	70 W. Hedding St, East W San Jose, CA 95110
ROM PROPERTY TAXES	MA CLA	Ph: (408) 299-6460 FAX: exemptions@asr.sccgov.c
o receive the full exemption, a claimant		www.sccassessor.org

NAME OF EXHIBITOR							
ADDRESS (STREET, CITY, STATE, ZIP	CODE)						
ADDRESS OF EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)						
	<i>T </i>				Λ		
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED							
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE 1	TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID		
1.							
2.							
3.							
4.							
5.			_				
I hereby state that:							
state; (b) I intend to remov (c) The property is s	y scientific, educational, religional, rel	following	its use or exhib or a foreign cou	ition here;	I all current taxes due in the		
FOR ASS	SESSOR'S USE ONLY		NAME				
Received by	(Assessor's designee)		ADDRESS (STREE	T, CITY, STATE, ZIP CODE)			
of	(county or city)		DAYTIME PHONE I	NUMBER			
on(date)		E-MAIL ADDRESS					
	(2227)						
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		