EF-270-AH-R05-0810-43000207-1 BOE-270-AH REV. 05 (08-10)

## 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.



## Lawrence E. Stone Santa Clara County Assessor

Exemption Division 70 W. Hedding St, East Wing, 5th Floor San Jose, CA 95110 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org www.sccassessor.org

VALE OF EXAMPLED	
NAME OF EXHIBITOR	
ADDRESS (STREET, CITY, STATE, ZIP CODE)	
ADDRESS OF EXHIBITION (STREET, BOOTH, ETC.; BE SPECIFIC)	
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.	
hereby state that:	
	ourposes of use or exhibition at an exposition, fair, carnival, or publistic works in this state and is used only for these purposes while in th
state;	
(b) I intend to remove the property from the state following	
other state or country have been paid.	or a foreign country while in this state, and all current taxes due in the
	Whom should we contact during normal business hours for additional information?
FOR ASSESSOR'S USE ONLY	NAME
	ADDRESS (STREET, CITY, STATE, ZIP CODE)
Received by	
(Assessor's designee)	
Of(county or city)	DAYTIME PHONE NUMBER

## **CERTIFICATION**

E-MAIL ADDRESS

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

