NAME OF EXHIBITOR

## 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.



LESLIE MORGAN ASSESSOR-RECORDER 1450 Court St., Suite 208A Redding, CA 96001-1667 Tel: (530) 225-3636

Intra\_County toll free: 1(800)479-8009

ADDRESS (STREET, CITY, STATE, 2	ZIP CODE)				
ADDRESS OF EXHIBITION (STREE					
	1, BOOTH, ETC., BE GI EGII IOJ				
		PROPERTY FOR WHICH EX			
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:					
	is brought into this state exclu ary, scientific, educational, relig				
•	ove the property from the stat	e following its use or exhil	bition here;		
(c) The property i	s subject to taxation in some o	-		all current taxes due in the	
other state of	country have been paid.				
			Whom should we contact du ousiness hours for additional	uring normal I information?	
FOR AS	SSESSOR'S USE ONLY	NAME			
		ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
Received by					
of	(Assessor's designee)				
Of(county or city)		DAYTIME PHONE	DAYTIME PHONE NUMBER		
on		( )			
(date)		E-MAIL ADDRESS	E-MAIL ADDRESS		
L		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

