EF-571-M-R06-0806-45000119-1 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.

**LESLIE MORGAN** ASSESSOR-RECORDER

1450 Court St., Suite 208A Redding, CA 96001-1667

2. LOCATION OF THE PROPERTY:

Tel: (530) 225-3640 Intra\_County toll free: 1(800)479-8009

ado soction 100. Attached schodules are considered to be part of the statement					le a separate statement for each location) reet Address			
. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.)								
					O YOU OWN THE LAND AT THIS LOCATION?			
					Yes No	our deed		
						corded as shown on this statement.  Yes No		
4. LO					OCAL PHONE NUMBER()			
E-N					Mail Address (optional)			
L					RANS:			
angible property owned, cl	laimed, possessed, controlled	, or managed by you at this lo	ocation at 12:01 a.m., Janu		Yes No	or veterans' exemption?		
	entories are exempt from ta	xation and should not be rep			yes, a separate "Claim	for Veterans' Exemptio	n" form must be filed	
				w	ith Assessor on or bef	ore February 15.		
	RIPTION OF PROPERTY	DATE AC QUIRED	COST		REMARKS		ASSESSOR'S USE ONLY	
5. SUPPLIES X X X X								
6. EQUIPMENT	X XXXX							
a. Total cost of all equ	X							
b. Equipment acquire	X XXXX		<u> </u>					
b. Equipment acquire	ed since January 1, last year	^ ^ ^ ^						
c. Equipment disposed of since January 1, last year XXXX XXX								
				_				
d. Total cost of all equipment held on January 1, this year X X X X								
7. OTHER (describe)								
	HOLD IMPROV <mark>EM</mark> ENTS: nd retirements in detail)	MONTH & Y	/EAR					
NSTRUCTIONS:			TOTAL FULL					
ine 5. Enter the cost of your supplies. ine 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to					VALUE			
be entered on line d may be computed by adding the figures f <mark>or lines a and b and</mark> subtracting the figure for li <mark>ne c.</mark>					PERSONAL PROPE	RTY		
tached.					FIXTURES			
ine 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6.					(IMPROVEMENTS)			
DECLARATION BY ASSESSEE					PROCESSING DATA			
OWNERSHIP TYPE (4)		following declaration mus			OPERATION	BY	DATE	
roprietorship	signed. If you do not do so, it may result in penalties.  I declare under penalty of perjury under the laws of the State of California that I				ANALYZED			
artnership $\Box$	have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is				COMPUTED			
orporation $\Box$	true, correct, and complete and includes all property required to be reported				APPRAISED			
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					REVIEWED			
IGNATURE OF ASSESSEE OR AUT	DATE		POSTED TO:					
NAME OF ASSESSEE OR AUTHOR	TITLE							
IAME OF LEGAL ENTITY (other than DBA) (typed or printed)			FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE:			
REPARER'S NAME AND ADDRESS (typed or printed)  TELEPHONE NUMBER			TITLE		BUS. CODE:			
		1: '	I		i .			

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.

