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.



Glenn Zook Solano County Assessor/Recorder 675 Texas Street Suite 2700 Fairfield, CA 94533-6338 (707) 784-6210 http://www.solanocounty.com/depts/ar assessor@solanocounty.gov

NAME OF EXHIBITOR						
ADDRESS (STREET, CITY, STATE, Z	ZIP CODE)					
ADDRESS OF EXHIBITION (STREE	T, BOOTH, ETC.; BE SPECIFIC)					
	LIST ALL PERSONAL	PROPERTY FOR W	HICH EX <mark>EM</mark> PT	ION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES P		OUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.	\frown \land					
3.	NA				- /	
4.						
5.						
I hereby state that:						
	s brought into <mark>this sta</mark> te exclu ry, <mark>sci</mark> entific, educational, relig					
(b) I intend to rem	ove the property from the stat	e following its use	or exhibition h	nere;		
	s subject to taxation in some o country have been paid.	other state or a for	Whom	while in this state, ar should we contact ss hours for addition	during normal	
FOR AS	SESSOR'S USE ONLY	NAME		_		
			ESS (STREET, CITY,			
Received by		ADDIN	L00 (0111LE1, 0111,	STATE, ZIF CODE)		
	(Assessor's designee)					
of						
(county or city)						
ON(<i>date</i>)			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

