EF-270-AH-R05-0810-51000150-1 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.



Kathy Scriven Sutter County Assessor 1160 Civic Center Blvd., Suite D

Yuba City, CA 95993 Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, 2	ZIP CODE)				
ADDRESS OF EXHIBITION (STREE	T, BOOTH, ETC.; BE SPECIFIC)			A	
	LIOTALL REPOONAL P	DODEDEN FOR WILLIAM FY	EMPTION IO OLAMED		
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.		VII			
5.		_			
I hereby state that:					
	s brought into this state exclusivy, scientific, educational, religion				
	ove the property from the state	-			
	s subject to taxation in some of country have been paid.	ther state or a foreign cou	intry while in this state, and	all current taxes due in the	
outer state of t	sountly have been paid.		Whom should we contact du	uring normal	
EOD AS	SSESSOR'S USE ONLY	NAME	usiness hou <mark>rs</mark> for additional	information?	
FOR AS	SSESSOR S USE ONLY				
		ADDRESS (STREE	T, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	4.				
(county or city)		DAYTIME PHONE N	DAYTIME PHONE NUMBER		
(date)		E-MAIL ADDRESS			
		CERTIFICATION			
	nder penalty of perjury under th				
including any accor	mpanying statements or docum	ents, is true, correct and	complete to the best of my k	nowledge and belief.	
SIGNATURE OF PERSON MAKING CLAIM		TITLE	1	DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

