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					
ADDRE	SS (STREET, CITY, STATE, Z	IP CODE)				
ADDRE	SS OF EXHIBITION (STREET	; BOOTH, ETC.; BE SPECIFIC)			Λ	
		LIST ALL PERSONAL F	PROPERTY FOR WHICH	HEXEMPTION IS CLAIMED		
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.					-	
3.					-	
4.						
5.						
THER	exhibit of literar state;		ious, or artistic works i	f use or exhibition at an exposit n this state and is used only for t		
	(c) The property is		-	Whom should we contact d	uring normal	
	FOR AS	SESSOR'S USE ONLY	NAME	NAME		
			ADDRESS (S	TREET, CITY, STATE, ZIP CODE)		
Rec	eived by	(Assessor's designee)				
Of(county or city)				DAYTIME PHONE NUMBER		
on	On(date)			() E-MAIL ADDRESS		
			CERTIFICATION			
10	ertify (or declare) un	der penalty of perjury under tl		California that the foregoing an	d 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

