EF-266-E-R01-0611-53000100-1 BOE-266-E (P1) REV. 01 (06-11)

## OWNERSHIP STATEMENT COOPERATIVE HOUSING CORPORATION

This statement represents a written request from the Assessor. Failure to file will result in the assessment of a penalty.

FILE THIS STATEMENT BY FEBRUARY 1.

NAME AND MAILING ADDRESS
(Make necessary corrections to the printed name and mailing address)

## Shanna White County Clerk-Recorder-Assessor

DATE

DAYTIME TELEPHONE NUMBER

TITLE

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

THIS IS	A
PROPERTY STREET ADDRESS	ASSESSOR'S PARCEL NUMBER
CITY	ZIP CODE
OWNERSHIP INFORMATION.  Attach a listing that provides:	
<ol> <li>the full name and mailing address of each owner, stockholder, or holder of an owners!</li> <li>a copy of the stock certificate or other document that evidences an interest in the unit</li> <li>the situs address, including the number, of each unit or lot;</li> <li>the date that an ownership interest was acquired and the acquisition price of that inter</li> <li>which of the shareholders or members resided in the designated dwelling units on the</li> </ol>	or lot; rest;

Copies of stock certificates and other documents evidencing an interest in an individual unit or lot that were provided to the

This statement must be filed on or before the first February 1 following an Assessor request, and on or before each February 1 thereafter. Failure to file the ownership statement, shall result in a penalty described in Revenue and Taxation Code section 482 for each individual unit or lot whose owner or shareholder fails to independently file the change in ownership statement.

**CERTIFICATION** 

I certify (or declare) that the foregoing and all information hereon, including any accompanying statements or documents, is

Assessor in a previous ownership report are not required to be provided in subsequent ownership reports.

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



true and correct to the best of my knowledge and belief.

SIGNATURE OF CORPORATE OFFICER

NAME OF CORPORATE OFFICER

EMAIL ADDRESS