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.



Shanna White County Clerk-Recorder-Assessor P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

NAME	OF EXHIBITOR							
ADDRE	SS (STREET, CITY, STATE, ZIF	P CODE)						
ADDRE	SS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)				_		
	LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED							
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID		
1.								
2.								
3.			\mathbf{N}			-		
4.								
5.								
I here						sition, fair, carnival, or public r these purposes while in this		
	,	ve the property from the stat	te following	ts use or exhib	ition here;			
 (c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the other state or country have been paid. Whom should we contact during normal business hours for additional information? 								
FOR ASSESSOR'S USE ONLY								
Rec	eived by			ADDRESS (STREE	T, CITY, STATE, ZIP CODE)			
		(Assessor's designee)						
	f (county or city)							
on	(<i>date</i>)			E-MAIL ADDRESS				
CERTIFICATION								
l c	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

