EF-571-M-R06-0806-53000392-1 BOE-571-M (FRONT) REV. 6 (8-06)

## \_ MISCELLANEOUS PROPERTY STATEMENT

## OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20 \_\_\_\_. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.

Deanna L. Bradford County Clerk-Recorder-Assessor

P.O. Box 1255 Weaverville, CA 96093

2. LOCATION OF THE PROPERTY:

Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

(File a separate statement for each location)

lode section 408. Attached	schedules are considered to	Street Address	reet Address			
I. NAME AND MAILING AD	DDRESS (Make necessary co	City				
Г		. DO YOU OWN THE LAND AT THIS LOCATION	O YOU OWN THE LAND AT THIS LOCATION?			
				Yes No		
				If yes, is the name on your deed		
				recorded as shown on this statement.		
			4.	. LOCAL PHONE NUMBER()		
				E-Mail Address (optional)		
1			V	ETERANS:		
				Are you filing a claim for veterans' exempt	ion?	
angible property owned, cl	laimed, possessed, controlled	or managed by you at this lo	ocation at 12:01 a.m., January 1 of corted for 1980 and future years.	Yes No		
o not report property eligi	ble for this exemption.	xation and should not be rep	Softed for 1980 and future years.	If yes, a separate "Claim for Veterans' Exem	ption" form must be filed	
				with Assessor on or before February 15.	<u> </u>	
DESC	CRIPTION OF PROPERTY	DATE AC		REMARKS	ASSESSOR'S	
E CHEDITEC		QUIRED			USE ONLY	
5. SUPPLIES		XXX				
6. EQUIPMENT		XXX				
a. Total cost of all equ	uipment h <mark>eld</mark> on January 1, la	st year X X X X	Х		1	
b. Equipment acquire	ed since January 1, last year	XXX	X X X X			
c. Equipment dispose	ed of since January 1, last yea	r XXX	x			
d. Total cost of all equ	uipment held on <mark>Jan</mark> uary 1, th	is year X X X X	X			
7. OTHER (describe)						
8. BUILDINGS OR LEASE	HOLD IMPROVEMENTS:	MONTH & Y	/EAD			
(describe additions ar	nd retirements <mark>in d</mark> etail)	MONTH &	EAN			
				TOTAL FULL		
NSTRUCTIONS: .ine 5. Enter the cost of you	ur cumplios			TOTAL FULL VALUE		
		e January 1 of last year. Addition	nal sheets may be attached. The figure to			
			subtracting the figure for li <mark>ne c.</mark> his location. Additional sheets may be at	PERSONAL PROPERTY		
tached.	•			FIXTURES		
ine 8. Describe in detail an	nd show the cost of all additions or landlord during the year being	and retirements to your buildin	gs, or to your leasehold improvements to	(IMPROVEMENTS)		
the buildings of you	i iandiord during the year being	DECLARATION BY AS		PROCESSING I	DATA	
OWNERSHIP	A1			_		
TYPE (4)		following declaration mus f you do not do so, it may		OPERATION BY	DATE	
Proprietorship			vs of the State of California that	ANALYZED		
Partnership	have examined this p	property statement, inclu	uding accompanying schedule	S, COMPUTED		
Corporation			t of my knowledge and belief it roperty required to be reporte			
	which is owned, claime	d, possessed, controlled,	or managed by the person name	nd l		
Other	as the assessee in this st	atement at 12:01 a.m. on	January 1, 20	REVIEWED		
SIGNATURE OF ASSESSEE OR AU	THORIZED AGENT*		DATE	POSTED TO:		
				_		
NAME OF ASSESSEE OR AUTHOR	RIZED AGENT* (typed or printed)		TITLE			
NAME OF LECAL ENTITY ('	han DRA) (tunedi-ti)		FEDERAL EMBLOVED ID AUTABER	TAY AREA CORE		
NAME OF LEGAL ENTITY (other t	nan DBA) (typed or printed)		FEDERAL EMPLOYER ID NUMBER	TAX AREA CODE:	_	
PREPARER'S NAME AND ADDRES	SS (typed or printed)	TELEPHONE NUMBER	TITLE	— BUS. CODE:		
ANER STATUTE AND ADDRES	(ypea of printed)	( )				

THIS STATEMENT SUBJECT TO AUDIT



<sup>\*</sup>Agent: see back for Declaration by Assessee instructions.

## **DECLARATION BY ASSESSEE**

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.



