EF-270-AH-R05-0810-05000663-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES



Calaveras County Assessor 891 Mountain Ranch Road San Andreas, CA 95249 209.754.6356

assessorpublic@co.calaveras.ca.us

Larie Durham

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

ADDRESS (STREET, CITY, STATE	, ZIP CODE)				
ADDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	ROPERTY FOR WHICH E	XEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
(c) The property	move the property from the state is subject to taxation in some of country have been paid.	her state or a foreign co	ountry while in this state, and Whom should we contact d	uring normal	
EOD A	ASSESSOR'S USE ONLY	NAME	business hours for additiona	I information?	
Received by		ADDRESS (STRE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
of	(county or city)	DAYTIME PHONE	E NUMBER		
on	(date)	E-MAIL ADDRES	S		
		CERTIFICATION			
	under penalty of perjury under the perpanying statements or docum				
SIGNATURE OF PERSON MAKING	G CLAIM	TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION