EF-270-AH-R05-0810-14000430-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES



Dave Stottlemyre, Assessor PO Box J Independence, CA 93526 760 878-0302 Phone inyoassessor@inyocounty.us

County of Inyo

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

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZI	P CODE)				
ADDRESS OF EXHIBITION (STREET,	BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	ROPERTY FOR WHICH E	EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
4.					
5.					
I hereby state that:					
(c) The property is	ove the property from the state subject to taxation in some ot ountry have been paid.	-		all current taxes due in the	
Whom should we contact during normal business hours for additional information?					
FOR AS	SESSOR'S USE ONLY	NAME	NAME		
		ADDRESS (STR	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PHON	E NUMBER		
On(date)		E-MAIL ADDRES	E-MAIL ADDRESS		
		CERTIFICATION			
	der penalty of perjury under th				
including any accompanying statements or documents, is trussignature of Person Making Claim		TITLE	a complete to the best of my	DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

