EF-261-D-R02-0810-23000399-1 BOE-261-D (P1) REV. 02 (08-10)

SERVICEMEMBER NAME

SERVICEMEMBERS CIVIL RELIEF ACT **DECLARATION**

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.

Katrina Bartolomie MENDOCINO COUNTY ASSESSOR 501 Low Gap Road, Room 1020

Ukiah, CA 95482

DAYTIME TELEPHONE NUMBER

Orian, Or 33402
Telephone: (707) 234-6800
Fax: (707) 463-6597

DAN	NK ORGANIZATION			SOCIAL SECURITY OR SERIAL NUMBER			E-MAIL ADDRESS			
IVAI				SOCIAL SECURITY OR SERIAL NOI		WIDER	L-IMAIL ADDIN	E33		
MAILING ADDRESS					CITY			STATE	ZIP CODE	
LEG	AL RESIDENCE ADDRESS		CITY			STATE	ZIP CODE			
VOT	VOTER REGISTRATION CITY					COUNTY			YEAR LAST VOTED	
									1.2.1.2.0. 70.25	
	LIST BELOW A	ANY PERSONAL PRO	PERTY	OR MANU	IFACTURED	HOME	LOCATE	D IN CAL	IFORNIA.	
			PEF	RSONAL PR	OPERTY					
	PROPERTY TYPE			DESCRIPTION			SERIAL/ID NUMBER			
\vdash			MAN	NUFACTURE	:D HOME					
	MANUFACTURER YEAR OF MANU									
					. OF INFARCT ACTORE					
INI	OTPLICTIONS:									
1.	STRUCTIONS:	rty by type description	and so	erial numbe	r or ID numh	or				
2.	List personal property by type, description, and serial number or ID number. Enter the manufacturer, year of manufacture, and decal or serial number of a manufactured home.									
3.	Attach a copy of your current leave and earnings statement.									
4.										
••	through which you have been granted the Power of Attorney.									
5.	Mail the original declaration with attachments to the Assessor's office at the address shown.									
			(CERTIFICA	TION					
		penalty of perjury under the or documents, is true and c						information	n hereon, including any	
SIGI	NATURE OF DECLARANT				DATE					