EF-270-AH-R05-0810-27000054-1 BOE-270-AH REV. 05 (08-10)

## **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.



## **Xochitl Marina Camacho Monterey County Assessor**

P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

NAME OF EXHIBITOR				
ADDRESS (STREET, CITY, STAT	TE, ZIP CODE)			
ADDRESS OF EXHIBITION (STF	REET, 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.				
hereby state that:				
exhibit of lite state; (b) I intend to re (c) The propert	ty is brought into this state excluserary, scientific, educational, religion emove the property from the state by is subject to taxation in some of country have been paid.	ous, or artistic works in t	this state and is used only for hibition here;	these purposes while in thi
	Whom should we contact during normal business hours for additional information?			
FOR	ASSESSOR'S USE ONLY	NAME		
		ADDRESS (STR	EET, CITY, STATE, ZIP CODE)	
Received by	(Assessor's designee)			
of				
(county or city)		DAYTIME PHON	DAYTIME PHONE NUMBER	
on	(date)	E-MAIL ADDRES	SS	
		CERTIFICATION		
	under penalty of perjury under th companying statements or docum			
SIGNATURE OF PERSON MAKING CLAIM		TITLE	a complete to the boot of my	DATE