#### EF-571-M-R06-0806-27000515-1 BOE-571-M (FRONT) REV.6 (8-06)

## 20 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.

1. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.)

# NONTERFO THESO

### 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

	2.	LOCATION OF THE PROPERTY:
		(File a separate statement for each location)
		Street Address
		City
٦	3.	DO YOU OWN THE LAND AT THIS LOCATION?

🗌 Yes 🛄 No		
If yes, is the name on your deed		
recorded as shown on this statement.	2 Yes	🗌 No

4. LOCAL PHONE NUMBER \_\_\_\_(

E-Mail Address (optional)

VETERANS:

Are you filing a claim for veterans' exemption?

🗌 Yes 🗌 No

If yes, a separate "Claim for Veterans' Exemption" form must be filed with Assessor on or before February 15.

Tangible property owned, claimed, possessed, controlled, or managed by you at this location at 12:01 a.m., January 1 of the year being reported. Inventories are exempt from taxation and should not be reported for 1980 and future years. Do not report property eligible for this exemption.

DESCRIPTION OF PROPERTY	DATE AC- QUIRED	COST		REMARKS	ASSESSOR'S USE ONLY	
5. SUPPLIES	X X X X					
6. EQUIPMENT	ХХХХ	X X X X				
a. Total cost of all equipment held on January 1, last year	X X X X					
b. Equipment acquired since January 1, last year	X X X X	X X X X				
c. Equipment disposed of since January 1, last year	x x x x	X X X X				
<ul> <li>d. Total cost of all equipment held on January 1, this year</li> <li>7. OTHER (describe)</li> </ul>	X X X X					
<ol> <li>BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail)</li> </ol>	MONTH & YEAR					
<ul> <li>INSTRUCTIONS:</li> <li>Line 5. Enter the cost of your supplies.</li> <li>List individually items acquired or disposed of since January 1 of last be entered on line d may be computed by adding the figures for line:</li> <li>Line 7. Enter the date acquired, cost, and description of any other personal tached.</li> <li>Line 8. Describe in detail and show the cost of all additions and retirements to the buildings of your landlord during the year being reported. Do not</li> </ul>	s a and b and subt property at this loo pyour buildings, o	racting the figure for li cation. Additional shee r to your leasehold imp were included in line 6	ne c. ets may be at- provements to	TOTAL FULL VALUE PERSONAL PROPERT FIXTURES (IMPROVEMENTS)		
				PROCESSING DATA		
OWNERSHIP TYPE (4)     Note: The following declar signed. If you do not do       Proprietorship     I declare under penalty of perjury und have examined this property stater statements or other attachments, and true, correct, and complete and incl which is owned, claimed, possessed, o as the assessee in this statement at 12:	o so, it may resu der the laws o ment, includin to the best of udes all prope controlled, or m	ult in penalties. f the State of Cali ng accompanying my knowledge an erty required to k nanaged by the pe	schedules, Id belief it is De reported	OPERATION ANALYZED COMPUTED APPRAISED REVIEWED	BY	DATE
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	DAT	DATE		POSTED TO:		
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)	TITL	TITLE				·
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)	FED	FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE:		
PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUME ( )	BER TITL	E		BUS. CODE:		

\*Agent: see back for Declaration by Assessee instructions.

THIS STATEMENT SUBJECT TO AUDIT



### 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.

