EF-270-AH-R05-0810-03000631-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

ADDRESS (STREET, CITY, STATE, ZIP CODE)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

** THE OR THE

Assessor of Amador County 810 Court Street

James B Rooney

Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

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

ADDRESS OF EXHIBITION (STREET, BOOTH, ETC.; BE SPECIFIC)

	LIST ALL PERSONAL	PROPERTY 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.				
hereby state that:			·	
	is subject to taxation in some country have been paid.	other state or a foreign co	ountry while in this state, and Whom should we contact d	
			business hours for additiona	
FOR A	SSESSOR'S USE ONLY	NAME		
		ADDRESS (STRE	EET, CITY, STATE, ZIP CODE)	
Received by	(Assessor's designee)			
. 10001100 by				
	(Assessor's designee)			
of	(Assessor's aesignee) (county or city)	DAYTIME PHONI	E NUMBER	
	(county or city)	()		
of		DAYTIME PHONI () E-MAIL ADDRES		
of	(county or city)	()		
of on I certify (or declare) u	(county or city)	CERTIFICATION the laws of the State of Co	s alifornia that the foregoing an	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION