EF-571-M-R06-0806-07000131-1 BOE-571-M (FRONT) REV. 6 (8-06)

_____ 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.



Gus Kramer County Assessor

2. LOCATION OF THE PROPERTY:

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

ada saction 100 Attached schodules are considered to be part of the statement						le a separate statement for each location) reet Address		
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.) O If re						ty		
						Mail Address (optional)		
						ERANS:		
angible property owned, considerated in the sear being reported. In the sear being reperty eligion of the search o	laimed, possessed, controlled ventories are exempt from ta ble for this exemption.	, or managed by you a xation and should no	at this loca ot be repor	tion at 12:01 a.m., Janu ted for 1980 and futur	A A lary 1 of E years.	re you filing a claim for veterans' exempti Yes No Yes, a separate "Claim for Veterans' Exemprith Assessor on or before February 15.		
DESCRIPTION OF PROPERTY			DATE AC- QUIRED	COST		REMARKS ASSESSOR'S USE ONLY		
5. SUPPLIES			XXXX					
6. EQUIPMENT			XXXX	XXXX				
a. Total cost of all equipment held on January 1, last year			XXXX					
b. Equipment acquired since January 1, last year			XXXX	xxxx				
c. Equipment disposed of since January 1, last year			XXXX	X X X X				
d. Total cost of all equipment held on January 1, this year			XXXX					
7. OTHER (describe)								
BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail)			NTH & YEA	ı.R				
NSTRUCTIONS: .ine 5. Enter the cost of your supplies.						TOTAL FULL VALUE		
ine 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c. ine 7. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be at-					PERSONAL PROPERTY			
tached. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6.					FIXTURES (IMPROVEMENTS)			
DECLARATION BY ASSESSEE					PROCESSING DATA			
OWNERSHIP TYPE (4)	Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties.				OPERATION BY	DATE		
Proprietorship \Box	I declare under penalty of perjury under the laws of the State of California that I				ANALYZED			
Partnership \square	have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is				COMPUTED			
Corporation \Box	true, correct, and complete and includes all property required to be reported					APPRAISED		
which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20					REVIEWED			
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*				DATE		POSTED TO:		
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)				TITLE				
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)				FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE:	_	
PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER ()			TIT	ΓLE		BUS. CODE:		
		<u> </u>				<u> </u>		

THIS STATEMENT SUBJECT TO AUDIT



^{*}Agent: see back for Declaration by Assessee instructions.

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.

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