EF-270-AH-R05-0810-11000216-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

Assessor 516 W. Sycamore St., 2nd Floor Willows CA 95988

Phone: (530) 934-6402 Fax: (530) 934-6571

Sendy Perez

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

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STAT	TE, ZIP CODE)				
ADDRESS OF EXHIBITION (STR	REET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL I	PROPERTY	FOR WHICH E	XEMPTION IS CLAIMED	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.					
2.					
3.					
4.					
5.					
(c) The propert	emove the property from the state y is subject to taxation in some or or country have been paid.		r a foreign co		during normal
FOR	ASSESSOR'S USE ONLY		NAME		
Received by			ADDRESS (STREET, CITY, STATE, ZIP CODE) DAYTIME PHONE NUMBER () E-MAIL ADDRESS		
		CERTI	FICATION		
	under penalty of perjury under to companying statements or docur				
SIGNATURE OF PERSON MAKING CLAIM			TITLE		DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION