EF-270-AH-R05-0810-20000355-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM

Madera County Assessor 200 West 4th Street Madera, CA 93637-3548

Brett Frazier

Phone: (559) 675-7710 Fax: (559) 675-7654

www.maderacounty.com/government/assessor

FROM PROPERTY TAXES

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, STA	ATE, ZIP CODE)				
ADDRESS OF EXHIBITION (ST	REET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL I	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.					
I hereby state that:	•				
state; (b) I intend to r (c) The proper	remove the property from the state ty is subject to taxation in some of or country have been paid.	e following its use or exhi	ibition here;		
		1	Whom should we contact during normal business hours for additional information?		
FOR	R ASSESSOR'S USE ONLY	NAME	NAME		
		ADDRESS (STRE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PHONE	NUMBER		
on	(date)	E-MAIL ADDRESS	S		
		CERTIFICATION			
	e) under penalty of perjury under to ccompanying statements or docur				
SIGNATURE OF PERSON MAK	TING CLAIM	TITLE		DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

