_ 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.) |
|----|--------------------------|---|
| | | |



Tammie Guenthart Mariposa County Assessor

4982 10th St P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332 Fax: (209) 966-5719

2. LOCATION OF THE PROPERTY:

tguenthart@mariposacounty.org Monday-Friday:8am-5pm

| Cada saction 400 Attached schodules are considered to be part of the statement | | | | | | | ile a separate statement for each location) treet Address | | |
|--|---|---|------------------------|---|---|----------------------------------|---|-------------------------|--|
| NAME AND MAILING AL | ODRESS (Make necessary co | rections to the printed na | me and | mailing address.) | | City | | | |
| Г | | | ¬ _{3.} | DO YOU OWN THE LAND AT THIS LOCATION? | | | | | |
| | | | | | | Yes No | | | |
| | | | | | | | yes, is the name on your deed | | |
| | ecorded as shown on this statement. Yes No | | | | | | | | |
| 4. LC | | | | | | | OCAL PHONE NUMBER() | | |
| | | | | | | E-Mail Address (optiona | nl) | | |
| 1 | | | | | | TERANS: | | | |
| | | | | | | Are you filing a claim fo | or veterans' exemption | n? | |
| langible property owned, c the year being reported. In | laimed, possessed, controlled ventories are exempt from ta | , or managed by you at th xation and should not be | is location reporte | on at 12:01 a.m., Jani d for 1980 and futu | uary 1 of re years. | Yes No If yes, a separate "Claim | for Votorans' Evompt | ion" form must be filed | |
| Do not report property eligi | | | • | | • | with Assessor on or bef | | ion form must be filed | |
| | | DATE | | | | | 0.0.00.00.00. | ASSESSOR'S | |
| DESCRIPTION OF PROPERTY | | | RED | COST | | REMARKS | REMARKS ASSESSOR'S USE ONLY | | |
| 5. SUPPLIES | X X | ХХ | | | | | 002 01121 | | |
| 6. EQUIPMENT | | X X | ХХ | XXXX | | | | | |
| a. Total cost of all equ | uipment held on January 1, la | st year X X | ХХ | | | | | | |
| | | , | | | | | | | |
| b. Equipment acquired since January 1, last year | | | хх | XXXX | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| c. Equipment dispos | ed of since January 1, last yea | r XX | хх | XXXX | | | | | |
| - T- P | | | | | | | | | |
| d. Total cost of all equ | uipment held on January 1, th | is year X X | ХХ | | | | | | |
| 7. OTHER (describe) | | , | | | | | | | |
| PI III DINGS OF LEASEHOLD IMPROVEMENTS: | | | 0. VEAD | | | | | | |
| | nd retirements in detail) | MONTH | & YEAR | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| INICTRUCTIONIC | | | | | | TOTAL FULL | | | |
| INSTRUCTIONS: Line 5. Enter the cost of you | ur supplies | | | | | VALUE | | | |
| Line 6. List individually iter | ns acquired or disposed of since | | | | | | | | |
| be entered on line d may be computed by adding the figures for lines a and b and Line 7. Enter the date acquired, cost, and description of any other personal property at the | | | | | | | | | |
| tached. Line 8. Describe in detail ar | ldings or | to your leasehold imp | rovoments to | FIXTURES | | | | | |
| | ir landlord during the year being | | | | | (IMPROVEMENTS) | | | |
| | | DECLARATION BY | | | PROCESSING D | ATA | | | |
| OWNERSHIP | Note: The | following declaration r | nust be | completed and | | OPERATION | BY | DATE | |
| TYPE (4) | | f you do not do so, it m | | | | ANALYZED | | | |
| Proprietorship | | | | the State of Cali | fornia that | ! | | | |
| Partnership statements or other attachments, and to the bes | | | pest of i | my knowledge an | d belief it is | 5 | | | |
| Corporation | | | | rty required to b | oe reported | APPRAISED | | | |
| Other as the assessee in this statement at 12:01 a.m. on J | | | | | 130111111111111111111111111111111111111 | REVIEWED | | | |
| SIGNATURE OF ASSESSEE OR AU | DATE | | | POSTED TO: | | | | | |
| <u> </u> | | | | | | | | | |
| NAME OF ASSESSEE OR AUTHOR | RIZED AGENT* (typed or printed) | | TITLE | | | | | | |
| NAME OF LEGAL ENTITY () | | | | - TAY ADEA COST | | | | | |
| NAME OF LEGAL ENTITY (other than DBA) (typed or printed) | | | | ERAL EMPLOYER ID NUN | IDEK | TAX AREA CODE: | | _ | |
| PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER | | | | | | - BUS. CODE: | | | |
| () | | | | | | | | | |

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.