EF-270-AH-R05-0810-23000097-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

ADDRESS (STREET, CITY, STATE, ZIP CODE)

## **EXHIBITION EXEMPTION CLAIM** FROM PROPERTY TAXES



501 Low Gap Road, Room 1020

**MENDOCINO COUNTY ASSESSOR** 

Ukiah, CA 95482

Katrina Bartolomie

Telephone: (707) 234-6800 Fax: (707) 463-6597

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)

T ALL PERSONAL P	ROPERTY FOR WHICH E	EXEMPTION IS CLAIMED	
TERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
	her state or a foreign c		
S USE ONLY	NAME		
	ADDRESS (STR	EET, CITY, STATE, ZIP CODE)	
esignee)			
city)	DAYTIME PHON	E NUMBER	
•)	F-MAIL ADDRES	is.	
,			
	OF DETIFICATION		
	CERTIFICATION		
of perjury under th		alifornia that the foregoing an	d all information hereon
	e laws of the State of C	alifornia that the foregoing and	
	nto this state excluse, educational, religion	nto this state exclusively for purposes of u to, educational, religious, or artistic works in the state following its use or exhibit taxation in some other state or a foreign content been paid.    Suse Only	nto this state exclusively for purposes of use or exhibition at an exposic, educational, religious, or artistic works in this state and is used only for experty from the state following its use or exhibition here; taxation in some other state or a foreign country while in this state, and the been paid.  Whom should we contact dousiness hours for additional NAME  ADDRESS (STREET, CITY, STATE, ZIP CODE)  DAYTIME PHONE NUMBER  ( )

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION