EF-264-AH-R13-0522-26000245-1 BOE-264-AH (P1) REV. 13 (05-22)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 - 20 (Example: a person filing a timely claim in January 2011

would enter "2011-2012.") This claim must be filed by 5:00 p.m., February 15.

Mono County Office of the Assessor Barry Beck, Assessor

PO Box 456

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

CLAIMANT NAME AND MAILING ADDRESS			FOR ASSESSOR'S USE ONLY			
(<i>N</i>	(Make necessary corrections to the printed name and mailing address)		Received by			
				(Assessor's o	designee)	
			of	(county c	or city)	
				(county c	541)	
L		٦	on	(dat	fe)	
f you no lor	nger seek an exemption at this lo	cation, check here Sign and retu	rn this form to the	Assessor. Date v	/acated:	
NAME OF CL	AIMANT					
TITLE OF CLA	AIMANT			DA	YTIME TELEPH	ONE NUMBER
CORPORATE	NAME OF THE COLLEGE				,	
ADDRESS (S	treet, City, County, State, Zip Code)					
ASSESSOR'S	S PARCEL NUMBER OR LEGAL DESC	RIPTION		DATE PROPERTY V	VAS FIRST USE	D BY CLAIMANT
1. Owner ar	nd operator: (check applicable bo	oxes)				
Claimant		Owner only	,			
and clain	ns exemption on all	☐ Buildings and improvements	and/or	Personal property		
2. Does the	above institution qualify as a co	llege or seminary of learning under th	e laws of the Sta	te of California?		
YES	NO					
3. Is the ins	stitution conducted as a non-profi	t entity?				
YES	NO	,				
4. Does the	institution require for regular add	mission the completion of a four-year	high school cour	se or its equivalen	it?	
YES	NO	, , , , ,	9			
5. Does the	institution confer upon its gradua	tes at least one academic or profession	nal degree, base	d on a course of at	least two year	s in liberal arts
and scier	nces, or on a course of at least th	ree years in professional studies, suc	ch as law, theolog			
		ire, fine arts, commerce, or journalisn	1?			
YES	∐ NO					
		claimed used exclusively for the pu	rposes of educati	on?		
YES	NO					
		for which exemption is claimed and sed or owned. Please use a separate				
BUI	ILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE		
					LEASE	\square OWN
					LEASE	□ OWN
					LEASE	OWN
					LEASE	OWN
					LEASE	OWN
					LEASE	□ OWN



TITLE

DATE



SIGNATURE OF PERSON MAKING CLAIM

NAME OF PERSON MAKING CLAIM