EF-264-AH-R13-0522-27000211-1 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.



Xochitl Marina Camacho Monterey County Assessor

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P. O. Box 570 Salinas, CA 93902-0570 Phone: (831) 755-5035 Fax: (831) 755-5435

assessor@co.monterey.ca.us

	CLAIMANT NAME AND MAILING ADDRESS			FOR ASSESSOR'S USE ONLY			
	(Make necessary corrections to the printed name		Descinate				
	Γ	٦	Received by _	(Assessor's de	esignee)		
			of				
			01	(county or	city)		
			on	(date			
	L			(date)		
If you	no longer seek an exemption at this lo	cation, check here 🗌 Sign and retu	ırn this form to the	e Assessor. Date va	acated:		
NAME	OF CLAIMANT						
TITLE	OF CLAIMANT			DAY	TIME TELEPH	ONE NUMBER	
CORP	ORATE NAME OF THE COLLEGE						
ADDR	ESS (Street, City, County, State, Zip Code)						
A C C E	SSOR'S PARCEL NUMBER OR LEGAL DESC	DIDTION		DATE PROPERTY W	AC FIDOT LICE	D DV CLAIMANT	
ASSE	SSOR S PARCEL NUMBER OR LEGAL DESC	RIPTION		DATE PROPERTY W	AS FIRST USE	D BY CLAIMAN I	
1 Ow	ner and operator: (check applicable bo	avae)		1			
		Owner only	V				
	d claims exemption on all			Personal property			
	es the above institution qualify as a col						
2. 00	YES NO	nege of seminary of learning under the	ie iaws of the Sta	te of California :			
3. Is 1	the institution conducted as a non-profi	t entity?					
4 Do	es the institution require for regular add	mission the completion of a four-year	r high school cour	se or its equivalent	2		
4. 00	YES NO	mission the completion of a four-year	riigii scriooi coui	se or its equivalent	:		
and	es the institution confer upon its graduard sciences, or on a course of at least the erinary medicine, pharmacy, architectures NO	ree years in professional studies, su	ch as law, theolog				
6 ls 1	the property for which the exemption is	claimed used exclusively for the nu	irposes of educati	ion?			
	YES NO	oranioa acca orenaero, ici are pe	poodo o oudou.				
	t all buildings and other improvements eet if necessary. Indicate whether lease						
	BUILDING & IMPROVEMENTS	PRIMARY USE	INCIDEN	TAL USE			
					LEASE	OWN	
					LEASE	OWN	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



TITLE

DATE



NAME OF PERSON MAKING CLAIM