EF-270-AH-R05-0810-27000090-1 BOE-270-AH REV. 05 (08-10)

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

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.



## **Xochitl Marina Camacho Monterey County Assessor**

P. O. Box 570 Salinas. CA 93902-0570

Odili 100, 071 00002 0070
Phone: (831) 755-5035
Fax: (831) 755-5435
assessor@co.monterey.ca.us

NAME OF EXHIBITOR						
ADDRESS (STREET, CITY, STATE	, ZIP CODE)					
ADDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)					
	LIST ALL PERSONAL F	PROPERTY FOR WHICH E	EXEMPTION 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:						
(c) The property	move the property from the state is subject to taxation in some of country have been paid.	-		all current taxes due in the		
Whom should we contact during normal business hours for additional information?						
FOR A	SSESSOR'S USE ONLY	NAME	NAME			
		ADDRESS (STR	ADDRESS (STREET, CITY, STATE, ZIP CODE)			
Received by	(Assessor's designee)					
of	(county or city)	DAYTIME PHON	DAYTIME PHONE NUMBER			
on		E-MAIL ADDRES	E-MAIL ADDRESS			
		CERTIFICATION				
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.						
SIGNATURE OF PERSON MAKING CLAIM		TITLE	a complete to the best of my	DATE		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION