EEGUAR ASSESSMENT https://www.ivceaar.org/ SUPPLEMENTAL ASSESSMENT Year:	-269-FIR-R02-0308-33000796-1 E-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EX ASSESSOR'S FIELD INSPECTION	-	ACR	Ass Cou PO I Rive	er Aldana sessor-County Clo nty of Riverside Box 751 rside, CA 92502-0751 ne: (951) 955-6200	erk-Record	der
Name of organization Address of <i>this</i> property	SUPPLEMENTAL ASSESSMENT	Vear	OONTY CLERK	https			
Address of <i>this</i> property							
□ Owner only □ Owner-Operator Date of last inspection of property If claimant is owner, name of owner is	Address of <i>this</i> property						
If damant is operator, name of operator is	Owner only		(street	, city, zip code)	,		
If daimant is operator, name of owner is A. Claimant is primarily: (check only one) 1. The primary activity the property is used for is: (check only one) a. administration e. fratemal and lodge meetings b. commercial f. fund raising c. educational g. hospital d. farming h. housing i. mother (explain) c. educational b. commercial c. fratemal and lodge meetings i. mother (explain) i. informational d. farming h. housing i. nother (explain) c. in excess of that reasonably necessary d. duscet for upperty for benefit of persons i. in excess of that reasonably necessary d. useer house personnel whose presence is not institutionally necessary? c. Operation of property for benefit of persons i. in your opinion are services and expenses excessive? i. In your opinion are services and expenses excessive? Yes if answer is no, explain: . D. Ownership of real property (so dapplicable lien date) is recorded in exact name of claimant Yes g. hoyour opinion is the claimant's name): Did owner file an exemption claim? Yes D. Ownership of real property (as dapplicable lien date) is recorded in exact name of claimant <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>							
A Claimant is primarily: (check only one) 1. charitable 2. other (explain) B Use of property 1. The primary activity the property is used for is: (check only one) i. medical (not hospital) b a. administration e. fratemal and lodge meetings i. medical (not hospital) c. ocumercial f. fund raising j. recreational c. educational g. hospital k. rehabilitation d. farming h. housing i. informational m. other (explain) c. c. 2. Other activities the property is used for are: a. List letters used in B1 b. Other(explain) c. in excess of that reasonably necessary d. user b. vacant or nunsed c. in excess of that reasonably necessary d. user c. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? Yes f. In your opinion is the claimant's proposed new capital investment, if any, necessary? Yes If answer is yes, explain: 2. Nuor opinion is the claimant's proposed new capital investment, if any, necessary? Yes If answer is no, explain: 3. In your opinion is the claimant's proposed new capital investment, if any, necessary? Yes If answer is no, explain:							
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