## MEDIA TRANSMITTAL FORM HOMEOWNERS' EXEMPTION CLAIM RECORDS



Josie Gonzales Assessor-Recorder-County Clerk San Bernardino County 222 W. Hospitality Lane, 4th Floor San Bernardino, CA 92415-0311 arc.sbcounty.gov 909-387-8307 or 1-877-885-7654

This form must be completed and included with all media submitted for processing. Submit the form and media to:

Board of Equalization County-Assessed Properties Division Homeowners' Exemption Coordinator PO Box 942879 MIC: 64 Sacramento, CA 94279-0064



COUNTY		COUNTY NUMBER	DATE SUBMITTED			
MAILING ADDRESS (STREET ADDRESS OR PO BOX)		CITY	1	STATE ZIP		
CONTACT PERSON	TELEPHONE		E-MAIL ADDRESS			
	( )					
MEDIA TYPE		FILENAME		FILET	YPE	
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MEDIA TYPE		FILENAME		FILET	YPE	
CD/DVD CARTRIDGE DISKETTE SECURE E-MAIL				ΠA	Н	🗌 FL
PROCESS TYPE (IF NEITHER R NOR A IS CHECKED, DATA IS PROCESSED AS NEW) R= RERUN (Overrides previously loaded data) A=ADDI		l more dete recei		borroru	n nor	additional)
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UPDATE	CHECK AS APPLICABLE					
1	INITIAL SUBMISSION	ALL HOMEOWNERS ALL DISABLED VETERANS				
2	PROCESSED MCL #1	LATE FILED CLAIMS LATE FILED CLAIMS INCLUDED ON MCL PROVIDED SEPARATELY DISABLE	ES ED VETERANS			
3	MCL #2 RETURNED DATA		ES ED VETERANS			
FINAL	MCL #3 - NO NEW CLAIMS	DO NOT INCLUDE NEW CLAIMS - RETURN PROCESSED MCL ONLY				

NOTES