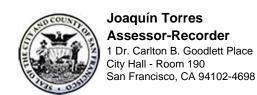
EF-263-A-R07-0617-38000471-1 BOE-263-A (P1) REV. 07 (06-17)

QUALIFIED LESSORS' EXEMPTION CLAIM

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS AND **USED EXCLUSIVELY FOR** PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, AND NONPROFIT COLLEGES

NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



To receive one time reporting treatment for the exemption, this claim must be filed with the Assessor within 120 days of the

I	ل	commencement date of the lease.			
DENTIFICATION OF APPLICANT					
LESSOR'S CORPORATE OR ORGANIZATION NAME					
MAILING ADDRESS					
CITY, STATE, ZIP CODE					
CORPORATE ID (IF ANY)					
DENTIFICATION OF PROPERTY					
ADDRESS OF PROPERTY (NUMBER AND STREET)				FISCAL YEAR OF CLAIM 20 20	
CITY, COUNTY, ZIP CODE ASSESSOR'S F				EL NUMBER	
USE OF PROPERTY Check and state the The exemption claim is made for the following pr	primary and incidental qualifying roperty: (if there are numerous property and the name	properties, please atta		y identifies the	
PROPERTY TYPE PRIMARY USE			INCIDENTAL USE		
Land				_	
☐ Buildings and Improvements					
Personal Property					
Yes No The lease confers upon the less	see the exclusive right to possess	sion and use of the pr	operty.		
Yes No As used herein a qualifying ins community college, state college	stitution is one whose property qge, state university, University of C				
Yes No The lessee institution has the control (one dollar) or any other nomina	option at the end of the lease terr al sum.	n of acquiring the abo	ove property descri	ped in the lease for \$1	
Important: A lessee's affidavit, in which the less will result in denial of one time reporting treatme				te the lessee's affidavit	
	CERTIFICATION	N			
I certify (or declare) under penalty of perjury und accompanying statements	der the laws of the State of Califol s or documents, is true and correc				
SIGNATURE OF PERSON MAKING CLAIM		DATE			
NAME OF PERSON MAKING CLAIM		TITLE			
EMAIL ADDRESS		DAYTIME TELEPHONE			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

AFFIDAVIT FOR EXECUTION BY QUALIFYING INSTITUTIONAL LESSEE

NAME OF OUR LEVINO LEGO	AFFIDAVII FOR EXECT	UTION BY QUA	ALIFYING INSTITUTION	UNAL LESSEE		
NAME OF QUALIFYING LESS	EE INSTITUTION					
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
✓ Check the type of qua	alifying use of the property					
☐ FREE PUBLIC LIBRARY ☐ COMMUNIT		COLLEGE UNIVERSITY OF CALIFORNIA				
☐ FREE MUSEUM ☐ STATE COL		EGE NONPROFIT COLLEGE				
☐ PUBLIC SCH	PUBLIC SCHOOL STATE UNIV		ERSITY			
NAME OF LESSOR						
MAILING ADDRESS						
CITY, STATE, ZIP CODE						
COMMENCEMENT DATE OF LEASE		DATE PROPERTY PUT TO EXEMPT USE				
	ΡΙ ΕΔΩΕ ΔΤΤ		 F THE LEASE AGREEM	ENT .		
	I LLAGE ATT	ACITA COL I OI	THE LEASE AGNEEM	LIVI		
The following property is etc. Attach a separate list		year. If personal p	property is being leased, in	ndicate the type, make, model, serial number,		
PROPERTY TYPE (REAL OR PERSONAL)		PROPERTY DESCRIPTION				
(NEXTERNATE)						
		4 4la a a a a a 4 4la a 1 a		shows are and described in the lease for MA		
	ar) or any other nominal sum.	t the end of the le	ease term of acquiring the	above property described in the lease for \$1		
		CERTIFIC	CATION			
	r penalty of perjury under the loompanying statements or doc			oing and all information hereon, including any y knowledge and belief.		
SIGNATURE OF PERSON MAKING	CLAIM			DATE		
NAME OF PERSON MAKING CLAIM				TITLE		
EMAIL ADDRESS				DAYTIME TELEPHONE		
LIWAILADDINEGO				/		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

