EF-270-AH-R05-0810-53000343-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

## EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

P.O. Box 1255 Weaverville, CA 96093 Phone: (530) 623-1257 Fax: (530) 623-8398 assessor@trinitycounty.org

County Clerk-Recorder-Assessor

**Shanna White** 

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

DDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	ROPERTY FOR WHICH E	XEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.					
1.					
5.					
nereby state that:	is brought into this state exclus				
state; (b) I intend to rer (c) The property	rary, scientific, educational, religion move the property from the state is subject to taxation in some of country have been paid.	following its use or exh	ibition here;		
Whom should we contact of business hours for addition					
FOR A	ASSESSOR'S USE ONLY	NAME			
		ADDRESS (STRI	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PHONI	E NUMBER		
on		( )	E NUMBER		
<i></i>	(date)	E-MAIL ADDRES	S		
		CERTIFICATION			
	under penalty of perjury under th				
	ompanying statements or docum				
IGNATURE OF PERSON MAKING CLAIM		TITLE	I	DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION