EF-571-M-R06-0806-54000824-1 BOE-571-M (FRONT) REV. 6 (8-06)

NAME OF LEGAL ENTITY (other than DBA) (typed or printed)

PREPARER'S NAME AND ADDRESS (typed or printed)

MISCELLANEOUS PROPERTY STATEMENT

OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20_ Failure to file it instructions and filed with the Assessor on or before April 1, 20____. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.

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



Tara K. Freitas County Assessor/Clerk-Recorder

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

from other information in required by Code section 46 contained herein will be h disclosed only to the disc Code section 408. Attached	Assessor's Office to estimate the value of n its possession and add a penalty of 63. This statement is not a public document. neld secret by the Assessor (Code section trict attorney, grand jury, and other agend I schedules are considered to be part of the significant DDRESS (Make necessary corrections to the part of the p	2. LOCATION OF THE PROPERTY: (File a separate statement for each location) Street Address City					
I			3. DO YOU OWN THE LAND AT THIS LOCATION? Yes No If yes, is the name on your deed recorded as shown on this statement. Yes No				
					4. LOCAL PHONE NUMBER(E-Mail Address (optional)		
Tangible property owned, cl the year being reported. Inv Do not report property eliqil	laimed, possessed, controlled, or managed by ventories are exempt from taxation and shou ble for this exemption.	r you at this locar uld not be repor	ition at 12:01 a.m., Janu ted for 1980 and futur	VETE Ar uary 1 of □	-Mail Address (optional) -RANS: re you filing a claim for veterans' exemptic 	on?	
	ole for this exemption.			W	ith Assessor on or before February 15.	T	
DESC	CRIPTION OF PROPERTY	DATE AC- QUIRED	COST		REMARKS	ASSESSOR'S USE ONLY	
5. SUPPLIES		XXXX					
6. EQUIPMENT		XXXX	XXXX				
a. Total cost of all equ	uipment held on January 1, last year	XXXX					
b. Equipment acquire	ed since January 1, last year	XXXX	XXXX				
c. Equipment dispose	ed of since January 1, last year	XXXX	XXXX				
d. Total cost of all equ	uipment held on January 1, this year	XXXX					
7. OTHER (describe)							
8. BUILDINGS OR LEASE (describe additions an	EHOLD IMPROVEMENTS: nd retirements in detail)	MONTH & YEA	ıR				
INSTRUCTIONS: Line 5. Enter the cost of you			TOTAL FULL VALUE				
be entered on line of Line 7. Enter the date acqui	ns acquired or disposed of since January 1 of last d may be computed by adding the figures for line ired, cost, and description of any other personal	ne c.	PERSONAL PROPERTY				
	nd show the cost of all additions and retirements to or landlord during the year being reported. Do not		FIXTURES (IMPROVEMENTS)				
	DECLARAT	TION BY ASSE	ESSEE		PROCESSING DATA		
OWNERSHIP Note: The following declaration mus TYPE (4) signed. If you do not do so, it may					OPERATION BY	DATE	
Proprietorship Partnership I declare under penalty of perjury under the have examined this property statement, in statements or other attachments, and to the base of the base of the statements or other attachments.			ing accompanying of my knowledge an	schedules, ad belief it is	COMPUTED	_	
Corporation Other	ludes all prop controlled, or r :01 a.m. on Jan	perty required to be managed by the penuary 1, 20	e reported rson named	APPRAISED			
SIGNATURE OF ASSESSEE OR AUT	DA	ATE		POSTED TO:			
NAME OF ASSESSEE OR AUTHOR	TIT	TLE					

TAX AREA CODE: BUS. CODE:

THIS STATEMENT SUBJECT TO AUDIT

FEDERAL EMPLOYER ID NUMBER

TITLE



^{*}Agent: see back for Declaration by Assessee instructions.

DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

EF-571-M-R06-0806-5400082