EF-270-AH-R05-0810-55000591-1
BOE-270-AH REV. 05 (08-10)

**Kaenan Whitman**
**Tuolumne County Assessor-Recorder**
2 South Green Street, Third Floor
Sonora, CA 95370
Phone: (209) 533-5535
Fax: (209) 533-5674
Email: assessor@co.tuolumne.ca.us

# EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

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

NAME OF EXHIBITOR

ADDRESS *(STREET, CITY, STATE, ZIP CODE)*

ADDRESS OF EXHIBITION *(STREET, BOOTH, ETC.; BE SPECIFIC)*

**LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED**

| DESCRIPTION | DATE ENTERED CALIFORNIA | DATE TAXES PAID | AMOUNT OF TAXES PAID | STATE OR COUNTRY IN WHICH PAID |
|---|---|---|---|---|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

I hereby state that:

(a) The property is brought into this state exclusively for purposes of use or exhibition at an exposition, fair, carnival, or public exhibit of literary, scientific, educational, religious, or artistic works in this state and is used only for these purposes while in this state;

(b) I intend to remove the property from the state following its use or exhibition here;

(c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the other state or country have been paid.

**FOR ASSESSOR'S USE ONLY**

Received by _____
*(Assessor's designee)*

of _____
*(county or city)*

on _____
*(date)*

**Whom should we contact during normal business hours for additional information?**

NAME

ADDRESS *(STREET, CITY, STATE, ZIP CODE)*

DAYTIME PHONE NUMBER
( )

E-MAIL ADDRESS

**CERTIFICATION**

*I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.*

| SIGNATURE OF PERSON MAKING CLAIM | TITLE | DATE |
|---|---|---|
| ▶ | | |

**THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION**

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