EF-571-M-R06-0806-58000565-1 BOE-571-M (FRONT) REV. 6 (8-06)

## \_\_\_ 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 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.



## Stephen S. Duckels Yuba County Assessor

915 8th Street, Suite 101 Marysville, CA 95901-5273 Phone: (530) 749-7820

2. LOCATION OF THE PROPERTY:

Code section 100 Attached school les are considered to be part of the statement								ile a separate statement for each location) reet Address			
1. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and m					ng address.)	City					
								yes, is the name on your deed			
4. LC								corded as shown on this statement. Yes No			
								OCAL PHONE NUMBER()  Mail Address (optional)			
L							/ETERA	NS: you filing a claim for	votorans' ovemntion	2	
Tangible property owned, clain	ned, possessed, controlled.	or managed by	vou at this lo	cation at 1	2:01 a.m., Jar	uarv 1 of		Yes D No	veteraris exemption	1:	
the year being reported. Inven Do not report property eligible	tories are exempt from tax	kation and shou	ld not be rep	orted for	1980 and futi	ire years.	If yes	s, a separate "Claim fo	or Veterans' Exempti	on" form must be filed	
	Tor this exemption:						with	Assessor on or before	re February 15.		
DESCRIPTION OF PROPERTY			DATE AC- QUIRED	-	COST			REMARKS ASSESSOR'S USE ONLY			
5. SUPPLIES			XXXX								
6. EQUIPMENT			XXXX	: )	XXXX						
a. Total cost of all equipment held on January 1, last year			XXXX								
b. Equipment acquired since January 1, last year			XXXX	; )	XXXX						
			V V V V		, , , , , ,						
c. Equipment disposed of since January 1, last year			XXXX	, ,	X X X						
d. Total cost of all equipment held on January 1, this year			XXXX								
7. OTHER (describe)			X X X X	•							
BUILDINGS OR LEASEHOLD IMPROVEMENTS:											
(describe additions and retirements in detail)			MONTH & YE	EAR							
INSTRUCTIONS:								TOTAL FULL			
Line 5. Enter the cost of your supplies.						. =	.	VALUE			
Line 6. List individually items acquired or disposed of since January 1 of last year. Addition be entered on line d may be computed by adding the figures for lines a and b and s				ubtracting	the figure for	ine c.		PERSONAL PROPER	ГΥ		
Line 7. Enter the date acquired, cost, and description of any other personal property at th tached.				s location.	Additional she	ets may be a	nt-	FIXTURES	• •		
Line 8. Describe in detail and show the cost of all additions and retirements to your buildings the buildings of your landlord during the year being reported. Do not repeat items the							to	(IMPROVEMENTS)			
DECLARATION BY ASSESSEE							PROCESSING DATA				
OWNERSHIP Note: The following declaration must be								BY	DATE		
TYPE (4)	signed. If you do not do so, it may result in penalties.							ANALYZED _			
_   h	I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules,						es,	COMPUTED _			
Partnership statements or other attachments, and to the best of my k								APPRAISED _			
_ · · v	which is owned, claimed, possessed, controlled, or managed by the person named						ed	REVIEWED _			
Other as the assessee in this statement at 12:01 a.m. on							_				
SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*				DATE				POSTED TO:			
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)				TITLE			_				
				FEDERAL EMPLOYER ID NUMBER							
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)								TAX AREA CODE: _			
PREPARER'S NAME AND ADDRESS (typed or printed)  TELEPHONE NUMBER ( )			BER	TITLE			$-\mid$	BUS. CODE:			

 ${\rm *Agent: see\ back\ for\ Declaration\ by\ Assessee\ instructions.}$ 

THIS STATEMENT SUBJECT TO AUDIT



## **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-R06-0806-5800056