EF-261-D-R02-0810-03000326-1 BOE-261-D (P1) REV. 02 (08-10)

SERVICEMEMBER NAME

SERVICEMEMBERS CIVIL RELIEF ACT DECLARATION

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.



James B Rooney Assessor of Amador County

DAYTIME TELEPHONE NUMBER

810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

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RANK	ORGANIZATION	8	SOCIAL SECURITY OR SERIAL NUMBER		E-MAIL ADDRES	E-MAIL ADDRESS		
MAILING ADDRESS			CIT	Y		STATE ZIP CODE		
LEGAL RESIDENCE ADDRESS			CIT	Y		STATE ZIP CODE		
VOTER REGISTRATION CITY			COI	JNTY		STATE YEAR LAST	VOTED	
LIST BELOW ANY PERSONAL PROPERTY OR MANUFACTURED HOME LOCATED IN CALIFORNIA.								
LIGI DELOW F	MITTERSONALTR	OFLITT	JI WANGI A	OTONED HOW	IL LOCATED	IN OALII OIXINA.	•	
PERSONAL PROPERTY								
PROPERTY 1	TYPE		DESCRIPTION		SEF	RIAL/ID N <mark>U</mark> MBER		

MANUFACTURED HOME MANUFACTURER YEAR OF MANUFACTURE DECAL/SERIAL NUMBER

INSTRUCTIONS:

- 1. List personal property by type, description, and serial number or ID number.
- 2. Enter the manufacturer, year of manufacture, and decal or serial number of a manufactured home.
- 3. Attach a copy of your current leave and earnings statement.
- 4. Sign and date the declaration. If you are signing this document with Power of Attorney, attach a copy of the document through which you have been granted the Power of Attorney.
- 5. Mail the original declaration with attachments to the Assessor's office at the address shown.

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 and correct to the best of my knowledge and belief.						
SIGNATURE OF DECLARANT	DATE					

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

