EF-270-AH-R05-0810-03000403-1 BOE-270-AH REV. 05 (08-10)

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.



James B Rooney Assessor of Amador County

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

NAME OF	EXHIBITOR						
ADDRESS	S (STREET, CITY, STATE, ZIP	CODE)					
ADDRESS	S OF EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)					
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED							
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXE	S PAID S	STATE OR COUNTRY IN WHICH PAID
1.							
2.							
3.			ΛZ				
4.			V				_
5.							_
I hereb	by state that:						
	exhibit of literary state;	brought into this state exclusion, scientific, educational, relig	gious, or artis	stic works in thi	is state and is used		
(•	e the property from the state	_				
(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. Whom should we contact during normal business hours for additional information?							
FOR ASSESSOR'S USE ONLY				NAME			
				ADDRESS (STREE	ET, CITY, STATE, ZIP CODE))	
Rece	ived by						
_		(Assessor's designee)					
of _		(county or city)		DAYTIME PHONE	NUMBER		
on	"						
011 _		(date)		E-MAIL ADDRESS			
			CERTI	FICATION			
		er penalty of perjury under to panying statements or docu					
					complete to the be		
SIGNATURE OF PERSON MAKING CLAIM			TITLE		DATE		

