	111 Stoll .	Gus Kramer	
F-269-FIR-R02-0308-07000356-1 DE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEM ASSESSOR'S FIELD INSPECTION RE		County Assessor 2530 Arnold Drive, Suite 1 Martinez, CA 94553-4359 FAX: (925) 313-7488	
REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT	24 (108)	Telephone: (925) 313-740 http://www.cccounty.us/as	
Information for Property No.			
Name of organization			
Address of <i>this</i> property	(stre	eet, city, zip code)	
□ Owner only □ Operator only □	Owner-Operator Date of last in:	spection of property	
If claimant is owner, name of operator is			
If claimant is operator, name of owner is			
A. Claimant is primarily: (check only one) 1. charitable	2. other <i>(explain)</i>		
B. Use of property			
1. The primary activity the propert	y is used for is: (check only one)	_	
 a. administration b. commercial c. educational d. farming m. other (<i>explain</i>) 	 e. fraternal and lodge meet f. fund raising g. hospital h. housing 	ings ings ingenerational in medical (not hose in the second secon	spital)
		B1	
			_
- · · · · · · · · · · · · · · · · · · ·		a. leased or rented	
	c. in excess of that re	easonably necessary	d. used to
	e is not institutionally necessary		
C. Operation of property for bene 1. In your opinion are services and	expenses excessive?		Yes 🗌 No
If answer is yes , explain: 2. In your opinion do oper <mark>ations en</mark>			Yes 🗌 No
 In your opinion is the claimant's If answer is no, explain: 	proposed new capital investment, if a	any, necessary?	
D. Ownership of real property (as of a lf answer is no, explain:	applicable lien date) is recorded in e	exact name of claimant	Yes No
		Did owner file an exemption claim?	Yes 🗌 No
 E. Supplemental Assessment (in claim 1. Date of change in ownership 		Recorded	🗌 Yes 🗌 No
Ownership in name of claimant? 2. Date of completion of new const			
Explain what was constructed —			
 Date put to exempt use 		If only a portion of the p	roperty is put to an
exempt use, describe exempt an	Id nonexempt portions in detail		
		vith Assessor	
		nquent	
F. A claim for veterans' organization			
1. was filed last year Yes	•		
3. was not filed last year, but claime	ed on another property located at	(give complete address including z	ip code)
G. Recommendation: 1. Approval	(all)	_ 2. Denial	(all)
	dentify specific area to be denied)		
Date			
2010	-		
	Бу		, Designe

