EF-270-AH-R05-0810-07000408-1 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.



## Gus Kramer County Assessor

2530 Arnold Drive, Suite 100 Martinez, CA 94553-4359 FAX: (925) 313-7488 Telephone: (925) 313-7400 http://www.cccounty.us/assessor

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, Z	IP CODE)				
NODICEO (OTTLET, OTT), OTTL, E	1 0052)				
ADDRESS OF EXHIBITION (STREET,	; BOOTH, ETC.; BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.					
2.		Λ			
3.					
4.					
7.					
5.					
I hereby state that:					
exhibit of literar state;	s br <mark>ou</mark> ght into <mark>thi</mark> s state excluy, scientific, educational, relig	ious, or arti	stic works in th	is state and is used only for	
` '	ove the property from the stat	•			
(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.					
other state of country have been paid.					
				Whom should we contact dusiness hours for additiona	
FOR AS	SESSOR'S USE ONLY		NAME NAME		
			ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by			ADDRESS (STREET, STATE, ZIP CODE)		
Treceived by	(Assessor's designee)				
of(county or city)			DAYTIME PHONE	NUMBER	
on			( )		
(date)			E-MAIL ADDRESS		
		CERTI	FICATION		
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 accon	npanying statements or docur	ments, is tru	e, correct and	complete to the best of my	knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		TITLE		DATE	

