|  |   |   | TOF OF   |                         | Sendy Perez   | Z                       |                             |  |
|--|---|---|--|-------------------------|---|-------------------------|-----------------------------|--|
| EF-571-M-R06-0806-11000052-1<br>BOE-571-M (FRONT) REV. 6 (8-06)<br>20 MISCELLANEOUS PROPERTY STATEMENT   |   |   |  |                         | Glenn County Assessor/Clerk/Recorder<br>516 W. SYCAMORE ST., 2ND FLOOR<br>WILLOWS, CA 95988 |                         |                             |  |
| OFFICIAL REQUIREMENT   | Seling the  | <i>p</i>  | Phone: (530) 93<br>FAX: (530) 934-                         |                         |   |                         |                             |  |
| A report submitted on this<br>and Taxation Code (Code)<br>instructions and filed with t<br>on time will compel the As<br>from other information in   | . The statement must b<br>the Assessor on or before<br>ssessor's Office to estima<br>its possession and add                                     | the<br>ile it<br>perty<br>as  |  | T AX. (330) 934-        | 0371  |                         |                             |  |
| required by Code section 463<br>contained herein will be he<br>disclosed only to the distr<br>Code section 408. Attached s   | n be<br>d in  | 2. LOCATION OF THE PROPERTY:<br>(File a separate statement for each location)<br>Street Address |  |                         |   |                         |                             |  |
| 1. NAME AND MAILING ADI  | e and mailing address.)   | □ 3. D  | City<br>DO YOU OWN THE LAND AT THIS LOCATION?<br>Yes No    |                         |   |                         |                             |  |
|  |   |   |  |                         | If yes, is the name on your deed<br>recorded as shown on this statement.                    |                         |                             |  |
|  |   |   |  |                         | . LOCAL PHONE NUMBER()  |                         |                             |  |
|  |   |   |  | E-                      | Mail Address (optiona   | al)                     |                             |  |
| L  |   |   |  |                         | RANS:   | _                       |                             |  |
| Tangible property owned, cla<br>the year being reported. Inve<br>Do not report property eligib   | entories are exempt from ta   | , or managed by you at this<br>xation and should not be re                                      | ocation at 12:01 a.m., Janua<br>ported for 1980 and future | ary 1 of<br>e years. If |   | for Veterans' Exemption | ?<br>on" form must be filed |  |
|  |   | DATE A  |  | w                       | ith Assessor on or before   | ore February 15.        | ASSESSOR'S                  |  |
|  | RIPTION OF PROPERTY   | QUIRE   | COST   |                         | RÉMARKS   |                         | USE ONLY                    |  |
| 5. SUPPLIES<br>6. EQUIPMENT  |   |   |  |                         |   |                         |                             |  |
| a. Total cost of all equipment held on January 1, last year X X X X  |   |   |  |                         |   |                         |                             |  |
|  | <u>, , , , , , , , , , , , , , , , , , , </u>   |   |  |                         |   |                         |                             |  |
| b. Equipment acquired since January 1, last year X X X X X X X X X X X X X   |   |   |  |                         |   |                         |                             |  |
|  |   |   |  |                         |   |                         |                             |  |
|  |   |   |  |                         |   |                         |                             |  |
| c. Equipment disposed  | d of since January 1, last yea  | r XXX   | x x x x x  |                         |   |                         |                             |  |
| d. Total cost of all equi  | pment held on January 1, th   | is year X X X   | x  |                         |   |                         |                             |  |
| 7. OTHER (describe)  |   |   |  |                         |   |                         |                             |  |
| 8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: MONTH & YEAR   |   |   |  |                         |   |                         |                             |  |
| (describe additions and retirements in detail)   |   |   |  |                         |   |                         |                             |  |
|  |   |   |  |                         |   |                         |                             |  |
| INSTRUCTIONS:  |   |   |  |                         | TOTAL FULL  |                         |                             |  |
| Line 5. Enter the cost of your   |   |   |  |                         | VALUE   |                         |                             |  |
| be entered on line d   | nal sheets may be attached.<br>subtracting the figure for line  | e c.  | PERSONAL PROPE   | RTV                     |   |                         |                             |  |
| Line 7. Enter the date acquir tached.  | his location. Additional sheet  | s may be at-  | FIXTURES   |                         |   |                         |                             |  |
| Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. |   |   |  |                         | (IMPROVEMENTS)  |                         |                             |  |
| DECLARATION BY ASSESSEE  |   |   |  |                         | PROCESSING DATA   |                         |                             |  |
| OWNERSHIP  | st be completed and   |   | OPERATION  | BY                      | DATE  |                         |                             |  |
| TYPE (4) Proprietorship  | signed. If you do not do so, it may result in penalties.<br>I declare under penalty of perjury under the laws of the State of California that I |   |  |                         | ANALYZED  |                         |                             |  |
| Partnership  | have examined this property statement, including accompanying schedules,  |   |  |                         | COMPUTED  |                         |                             |  |
| Corporation  | corporation $\Box$ true, correct, and complete and includes all property required to be reported  |   |  |                         |   |                         |                             |  |
| Other  | which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 |   |  |                         | REVIEWED  |                         |                             |  |
| SIGNATURE OF ASSESSEE OR AUT   | DATE  |   | POSTED TO:   |                         |   |                         |                             |  |
| NAME OF ASSESSEE OR AUTHORIZ   | TITLE   |   |  |                         |   |                         |                             |  |
| NAME OF LEGAL ENTITY (other than DBA) (typed or printed)   |   |   | FEDERAL EMPLOYER ID NUMBER                                 |                         | TAX AREA CODE:  |                         |                             |  |
| PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER  |   |   | TITLE  |                         | BUS. CODE:  |                         |                             |  |
|  |   | ( )   |  |                         |   |                         |                             |  |

\*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.

