EF-270-AH-R05-0810-14000257-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM

Dave Stottlemyre, Assessor P.O. Box J Independence, CA 93526

County of Inyo

(760) 878-0302 inyoassessor@inyocounty.us

FROM PROPERTY TAXES

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZIP	CODE)				
ADDRESS OF EXHIBITION (STREET, I	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.					-
5.					
exhibit of literary state; (b) I intend to remove (c) The property is some other state or contact the contact that the contac	ve the property from the state subject to taxation in some country have been paid.	ious, or artise	stic works in the	is state and is used only fo	
FOR ASSESSOR'S USE ONLY			NAME		
Received by			ADDRESS (STREE	ET, CITY, STATE, ZIP CODE)	
(county or city)			DAYTIME PHONE NUMBER ()		
On(date)			E-MAIL ADDRESS		
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, correct and complete to the best of my knowledge and belief.					
SIGNATURE OF PERSON MAKING CL	AIM		TITLE		DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

