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.



Douglas W. Wacker County Assessor-Recorder

Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453 Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293 Fax: 707-263-3703

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE,	ZIP CODE)				
ADDRESS OF EXHIBITION (STREE	T, BOOTH, ETC.; BE SPECIFIC)			Λ	
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.	NA			-	
4.					
5.					
exhibit of litera state; (b) I intend to rem	is brought into this state exclu ary, scientific, educational, religi nove the property from the state is subject to taxation in some o	ous, or artistic works in the following its use or exhibit	is state and is used only for t bition here;	hese purposes while in this	
	country have been paid.		Whom should we contact do	uring normal	
FOR AS	SSESSOR'S USE ONLY	NAME			
Received by	(Assessor's designee)	ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
of					
of		DAYTIME PHONE	DAYTIME PHONE NUMBER		
(date)		E-MAIL ADDRESS	E-MAIL ADDRESS		
CERTIFICATION					
l certify (or declare) u	nder penalty of perjury under th	ne laws of the State of Ca	lifornia that the foregoing an	d 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 CLAIM	TITLE	DATE			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

