EF-571-M-R06-0806-17000213-1 BOE-571-M (FRONT) REV. 6 (8-06)

_ MISCELLANEOUS PROPERTY STATEMENT

OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20 ____. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.

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

2. LOCATION OF THE PROPERTY:

disclosed only to the discode section 408. Attached	trict attorney, grand jury, a schedules are considered to	nd other agencies specified be part of the statement.	in (File a separate statement for each locati Street Address					
1. NAME AND MAILING AD	DDRESS (Make necessary cor	rections to the printed name	and mailing address.)		ity			
Γ				3. DO YOU OWN THE LAND AT THIS LOCATION?				
					Yes No			
					yes, is the name on y	our deed this statement.	as \square No	
					4. LOCAL PHONE NUMBER(
					-Mail Address (option ERANS:	ai)		
L						or veterans' exemption	?	
	aimed, possessed, controlled			ary 1 of	Yes No			
Do not report property eligil	ventories are <mark>ex</mark> empt from ta ole for this e <mark>xem</mark> ption.	kation and should not be rep	borted for 1980 and future	111	yes, a separate "Claim ith Assessor on or be	n for Veterans' Exemption	on" form must be filed	
		T		W	itti Assessoi on or be	lore rebruary 13.		
DESC	RIPTION OF PROPERTY	DATE AC QUIRED			REMARKS		ASSESSOR'S USE ONLY	
5. SUPPLIES		XXX	X				032 0112.	
6. EQUIPMENT		XXX	X X X X X					
a. Total cost of all equ	uipment h <mark>eld</mark> on January 1, las	st year X X X X	x					
b. Equipment acquire	ed since January 1, last year	X X X	X X X X					
						_		
		V V V						
c. Equipment dispose	ed of since January 1, last year	XXX	X XXXX					
d Total cost of all equ	uipment held on January 1, th	is year X X X X	x					
7. OTHER (describe)	inpinient field off Juliuary 1, th	3 year A A A	^					
	HOLD IMPROVEMENTS:	MONTHO	(54.5)					
	d retirements in detail)	MONTH & Y	EAR					
INSTRUCTIONS:					TOTAL FULL			
Line 5. Enter the cost of you				TI 6 .	VALUE			
be entered on line of	ns acquired or disposed of since I may be computed by adding t	he figures for lines a and b and	subtracting the figure for lin	e c.	PERSONAL PROPE	RTY		
Line 7. Enter the date acqui	ired, cost, and description of an	y other pe <mark>rso</mark> nal property at th	is location. Additional sheet	ts may be at-	FIXTURES			
	d show the cost of all additions r landlord during the year being				(IMPROVEMENTS)			
the buildings of you	riandiora during the year being	DECLARATION BY AS			PROCESSING DATA		TA	
OWNERSHIP	Note: The	ollowing declaration mus	st be completed and		OPERATION	BY	DATE	
TYPE (4)		you do not do so, it may			ANALYZED			
Proprietorship					COMPUTED			
statements or other attachments, and to the best			t of my knowledge and	d belief it is				
Corporation			roperty required to b or managed by the per	e reported son named	APPRAISED			
Other L	as the assessee in this st	atement at 12:01 a.m. on	, , ,		REVIEWED			
SIGNATURE OF ASSESSEE OR AU	THORIZED AGENT*		DATE		POSTED TO:			
NAME OF ASSESSEE OR AUTHOR	IZED AGENT* (typed or printed)		TITLE					
	(Jyped of printed)		-					
NAME OF LEGAL ENTITY (other t	han DBA) (typed or printed)		FEDERAL EMPLOYER ID NUMI	BER	TAX AREA CODE:			
DDEDADED/C NAME AND ADDRESS	C /t d	TELEPHONE NUMBER			BUS. CODE:			
PREPARER'S NAME AND ADDRES	১ (typed or printed)	TELEPHONE NUMBER ()	TITLE					

THIS STATEMENT SUBJECT TO AUDIT



^{*}Agent: see back for Declaration by Assessee instructions.

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.

