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.



Ms. Sharon Moeller Los Angeles County Assessor 500 W Temple ST Los Angeles, CA 90012-2770 Phone: (213) 974-3341

| NAME OF EXHIBITOR | | | | | |
|---------------------------------|---|-------------------------------|--|-----------------------------------|--|
| ADDRESS (STREET, CITY, STATE, Z | ZIP CODE) | | | | |
| ADDRESS OF EXHIBITION (STREET | T, BOOTH, ETC.; BE SPECIFIC) | | | | |
| | | | | | |
| | LIST ALL PERSONAL | PROPERTY FOR WHICH E | EMPTION 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; | s brought into this state exclu ry, scientific, educational, relig | ious, or artistic works in th | is state and is used only for th | | |
| () | ove the property from the state | e e | | | |
| | s subject to taxation in some of country have been paid. | ICI | untry while in this state, and a Whom should we contact du pusiness hours for additional | iring normal | |
| FOR ASSESSOR'S USE ONLY | | NAME | NAME | | |
| | | ADDRESS (STRE | ET, CITY, STATE, ZIP CODE) | | |
| Received by | (Assessor's designee) | | | | |
| of | | | | | |
| on | (county or city) | | DAYTIME PHONE NUMBER | | |
| | (date) | E-MAIL ADDRESS | E-MAIL ADDRESS | | |
| | | CERTIFICATION | | | |
| L cortifu (or declare) ur | der penalty of periury under t | | lifornia that the foregoing and | d all information hereon | |

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 CLAIM | TITLE | DATE | | | |
|----------------------------------|-------|------|--|--|--|
| | | | | | |
| | | | | | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

