EF-263-B-R02-0810-23000225-1 BOE-263-B (P1) REV. 02 (08-10)

LESSEES' EXEMPTION CLAIM

Declaration of property information as of 12:01 a.m., January 1, 20___.

PROPERTY **USED EXCLUSIVELY FOR PUBLIC** SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR UNIVERSITY OF CALIFORNIA

> NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)



Katrina Bartolomie MENDOCINO COUNTY ASSESSOR

501 Low Gap Road, Room 1020 Ukiah, CA 95482 Telephone: (707) 234-6800 Fax: (707) 463-6597

To receive the full exempt	tion, this claim must
be filed with the Assessor	r by February 15.

L	٦	be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		_
LESSEE'S CORPORATE OR ORGANIZATION NAME		
MAILING ADDRESS		
CITY, STATE, ZIP CODE		
CORPORATE ID (IF ANY)		
IDENTIFICATION OF PROPERTY		
ADDRESS OF PROPERTY (NUMBER AND STREET)		
CITY, COUNTY, ZIP CODE	7 <i>/V//</i>	ASSESSOR'S PARCEL NUMBER
	primary and incidental qualifying uses of th	
The exemption claim is made for the following p	roperty: (if there are numerous properties property and the name and addre	
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
☐ Buildings and Improvements		
Personal Property		
☐ Yes ☐ No Does the lease/agreement conf		a public school, community college, state college,
state university, or University of University of California purpose	California that is used exclusively for com-	munity college, state college, state university, or
Note: If requested by the assessor, the claimant	t shall provide a copy of the lease or agree	ment.
	CERTIFICATION	
	der the laws of the State of California that the sor documents, is true and correct to the bo	ne foregoing and all information hereon, including any est of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		DATE
NAME OF PERSON MAKING CLAIM		TITLE
WANTE OF FEROOM WARRING OFFICE		11111
E-MAIL ADDRESS		DAYTIME TELEPHONE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

