EF-571-M-R06-0806-23000278-1 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.

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

SUSAN M. RANOCHAK MENDOCINO COUNTY ASSESSOR

501 Low Gap Road, Room 1020

Ukiah, CA 95482

2. LOCATION OF THE PROPERTY:

Telephone: (707) 463-4315 Fax: (707) 463-6597

isclosed only to the district ode section 408. Attached sch	,	(File a separate statement for each location) Street Address						
. NAME AND MAILING ADDRE		·	and mailing address.)		ty			
Γ	·			3. DO YOU OWN THE LAND AT THIS LOCATION?				
			Yes No					
					yes, is the name on you			
					corded as shown on this statement.			
						OCAL PHONE NUMBER() Mail Address (optional)		
					e you filing a claim for	veterans' exemption	?	
angible property owned, claimene year being reported. Invente	ed, posse <mark>sse</mark> d, controll <mark>ed</mark> ories are exempt from ta	, or manage <mark>d b</mark> y you <mark>at</mark> this lo xation and should not be ret	ocation at 12 <mark>:01</mark> a.m., Jan ported for 1980 and futu		Yes No		"6 .1 61 1	
o not report property eligible f	or this ex <mark>em</mark> ption.	Mation and Stoute 10, 50 rep	Solica for 1900 and fata		yes, a separate "Claim f th Assessor on or befo		n" form must be filed	
		1	.	T VVI	til Assessol oll of belo	re rebruary 13.		
DESCRIPT	TON OF PROPERTY	DATE AC QUIRED	(0)		REMARKS		ASSESSOR'S USE ONLY	
5. SUPPLIES		XXXX				_	USE OINEI	
6. EQUIPMENT		XXX						
a. Total cost of all equipm	ont hold on January 1 Ja							
a. Total cost of all equipm	ent neid on January 1, la	st year AAA	^					
t Fortania del			y y y y					
b. Equipment acquired sir	nce January 1, last year	XXX	x x x x x					
						_		
c. Equipment disposed of	since January 1, last yea	XXX	x xxxx					
d. Total cost of all equipm	ent held on January 1, th	is year X X X X	X					
7. OTHER (describe)								
 BUILDINGS OR LEASEHOL (describe additions and re 		MONTH & Y	'EAR					
(describe additions and re	tirements in detail)							
NSTRUCTIONS:					TOTAL FULL			
ine 5. Enter the cost of your sup			VALUE					
	nal sheets may be attached. The figure to subtracting the figure for line c.		PERSONAL PROPER	TV				
ine 7. Enter the date acquired,		y other pe <mark>rso</mark> nal property at th				.1 Y		
tached. ine 8. Describe in detail and sh	gs, or to your leasehold im	provements to	FIXTURES (IMPROVEMENTS)					
the buildings of your land	that were included in line	5.	(IIVIFROVEIVIEIVI3)					
		DECLARATION BY AS	SSESSEE	ESSEE PROCESSING DATA			ГА	
OWNERSHIP	st be completed and		OPERATION	BY	DATE			
TYPE (4)	result in penalties.		ANALYZED					
_ ha	s of the State of Cali uding accompanying	itornia that l L schedules	COMPUTED					
\Box arthership \Box sta	t of my knowledge ar	nd belief it is						
orporation	roperty required to lor managed by the pe	be reported	APPRAISED .		-			
other as	the assessee in this st	atement at 12:01 a.m. on .	January 1, 20		REVIEWED			
IGNATURE OF ASSESSEE OR AUTHOR	RIZED AGENT*		DATE		POSTED TO:			
>								
IAME OF ASSESSEE OR AUTHORIZED	TITLE							
IAME OF LEGAL ENTITY (other than D	FEDERAL EMPLOYER ID NUM	MBER	TAX AREA CODE:					
DEDA DEDIC MAME AND ASSOCIATION			BUS. CODE:					
REPARER'S NAME AND ADDRESS (type	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.

