EF-270-AH-R05-0810-24000101-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

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MERCED COUNTY

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To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZIF	P CODE)				
ADDRESS OF EXHIBITION (STREET,	$T \cap H$			<u></u>	
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.					
4.		VIII		-	
5.					
I hereby state that:					
state; (b) I intend to remo (c) The property is	y, scientific, educational, religive the property from the state subject to taxation in some country have been paid.	e following its use or exhib other state or a foreign cou	vition here;	d all current taxes due in the	
FOR ASS	SESSOR'S USE ONLY	NAME	NAME		
		ADDRESS (STREE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
Of(county or city)		DAYTIME PHONE I	DAYTIME PHONE NUMBER		
on		E-MAIL ADDRESS	E-MAIL ADDRESS		
CERTIFICATION					
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

