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.



MERCED COUNTY

MATT H. MAY, ASSESSOR 2222 M STREET MERCED, CA 95340 TELEPHONE (209) 385-7631 FAX (209) 725-3956 www.co.merced.ca.us\assessor

NAME O	F EXHIBITOR					
ADDRES	SS (STREET, CITY, STATE, ZIP	CODE)				
ADDRES	S OF EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)				
		LIST ALL PERSONAL	PROPERTY	FOR WHICH EX	EMPTION IS CLAIMED	
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE	TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.						
2.						-
3.			Λ			- /
4.						
5.						
	exhibit of literary state;(b) I intend to removing(c) The property is state	r, scientific, educational, relig ve the property from the stat	gious, or arti te following	stic works in thi its use or exhib	or exhibition at an exposit s state and is used only for t ition here; intry while in this state, and	hese purposes while in this
				bi	Whom should we contact du usiness hours for additional	uring normal information?
	FOR ASS	ESSOR'S USE ONLY		NAME		
Received by			ADDRESS (STREET, CITY, STATE, ZIP CODE)			
		(Assessor's designee)				
	(county or city)			DAYTIME PHONE NUMBER		
on _	ON(<i>date</i>)			E-MAIL ADDRESS		
			CERT	FICATION		
l ce	ertify (or declare) und	ler penalty of perjury under a	the laws of i	he State of Cal	ifornia that the foregoing and	d 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

