	TY OF HOL	Cheri Budmark
263-B-R02-0810-25000416-1	CONTRACT OF	Modoc County Assessor
E-263-B (P1) REV. 02 (08-10)		204 Sout Court Street, Suite 106
LESSEES' EXEMPTION CLAIM	18 74	Alturas, CA 96101
Declaration of property information as of 12:01 a.m.,	SALIFORNIA	Phone: (530) 233-6218
January 1, 20		Fax: (530) 233-6237 assessor@co.modoc.ca.us
PROPERTY USED EXCLUSIVELY FOR PUBLIC		assessor @co.modoc.ca.us
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)		
		To receive the full exemption, this claim must
L		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		ASSESSOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the primary and	incidental qualifying uses of t	
The exemption claim is made for the following property: (if t		
pro	perty and the name and addr	ess of the lessee)
PROPERTY TYPE	PRIMARY USE	IN <mark>CI</mark> DENTAL USE
Buildings and Improvements		_
Personal Property		
Yes No Does the lease/agreement confer upon the I	essee the exclusive right to p	oossession and use of the property?
		-
Yes No Is the claimant a lessee or operator of real o	r personal property owned by	a public school, community college, state college,
	at is used exclusively for com	munity college, state college, state university, or
University of California purposes?		
Note: If requested by the assessor, the claimant shall provide	a conv of the lease or agree	ement
	CERTIFICATION	
Lootify (or dealars) under nor - the -franciscus day the laws		the formation and all information to many installing
I certify (or declare) under penalty of perjury under the laws or accompanying statements or documen		
SIGNATURE OF PERSON MAKING CLAIM		DATE

	DAIL
NAME OF PERSON MAKING CLAIM	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE
	( )

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

