EF-571-M-R06-0806-25000265-1 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.

Cheri Budmark Modoc County Assessor

204 Sout Court Street, Suite 106 Alturas, CA 96101 Phone: (530) 233-6218 Fax: (530) 233-6237

(File a separate statement for each location)

assessor@co.modoc.ca.us

2. LOCATION OF THE PROPERTY:

ode section 400. Attached	scricules are considered to	be part of the statement.		St	reet Address		
. NAME AND MAILING AD	ODRESS (Make necessary con	rections to the printed name	and mailing address.)	Cir	ty		
Γ		O YOU OWN THE LAND AT THIS LOCATION? Yes No					
					yes, is the name on your	deed	
					corded as shown on this		s No
					OCAL PHONE NUMBER .		
					Mail Address (optional)		
		RANS:					
angible property owned c	laimed, possessed, controlled	or managed by you at this le	ecation at 12,01 a.m. Januar		e you filing a claim for v	eterans exemption?	
ne year being reported. In	ventories are exempt from ta	xation and should not be re	ported for 1980 and future	_	yes, a separate "Claim fo	r Veterans' Evemption	n" form must be filed
o not report property eligi	ble for this exemption.				th Assessor on or before		i ioiii iiidat be iiied
		DATE AC					ASSESSOR'S
DESC	CRIPTION OF PROPERTY	QUIRE	(0)		RÉMARKS		USE ONLY
5. SUPPLIES X X X X						_	OJE ONEI
6. EQUIPMENT XXXX							
-	uipment held on January 1, la						
a. Total cost of all equ	alpinent neid on January 1, ia	st year AAA	^				
b. Equipment acquired since January 1, last year			X X X X				
						_	
c. Equipment dispose	ed of since January 1, last yea	r XXX	X X X X				
d. Total cost of all equ	uipment held on J <mark>an</mark> uary 1, th	is year X X X	X				
7. OTHER (describe)							
8. BUILDINGS OR LEASE		MONTH &	(FAR				
(describe additions ar	nd retirements <mark>in d</mark> etail)	Indiana.	2711				
ICTRUCTIONS					TOTAL FULL		
NSTRUCTIONS: ine 5. Enter the cost of you	ır supplies				VALUE		
ine 6. List individually iten	ns acquired or disposed of since						
	d may be computed by adding t ired, cost, and description of ar				PERSONAL PROPERT	Y	
tached.	•			•	FIXTURES		
	nd show the cost of all additions or landlord during the year being			vements to	(IMPROVEMENTS)		
the buildings of you	i iandiord during the year being	DECLARATION BY AS			D	ROCESSING DAT	-Λ
OWNEDCHID	N . T						
OWNERSHIP Note: The following declaration must signed. If you do not do so, it may			st be completed and result in penalties.		OPERATION	BY	DATE
, ,		rnia that I	ANALYZED				
oprietorship rtnership I declare under penalty of perjury under the laws of the State of California that have examined this property statement, including accompanying schedule statements or other attachments, and to the best of my knowledge and belief it					COMPUTED _		
forporation \Box	t of my knowledge and roperty required to be		APPRAISED				
	on named						
Other	as the assessee in this st	atement at 12:01 a.m. on	January 1, 20		REVIEWED		
IGNATURE OF ASSESSEE OR AU	DATE		POSTED TO:				
IAME OF ASSESSEE OR AUTHOR	TITLE						
IAME OF LEGAL ENTITY (: 1	FEDERAL FAARI OVER IS AUTOS		TAY ADEA CODE				
IAME OF LEGAL ENTITY (other t	FEDERAL EMPLOYER ID NUMBE	К	TAX AREA CODE:				
REPARER'S NAME AND ADDRES	TITLE		BUS. CODE:				
THE AREN S INVINE WIND WOOKES	IIILL						

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.



