EF-270-AH-R05-0810-26000246-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

PO Box 456 Bridgeport, CA 93517-0456 Telephone: 760-932-5510

Fax: 760-932-5511

Barry Beck, Assessor

Email: assessor@mono.ca.gov

Website: www.monocounty.ca.gov/assessor

Mono County Office Of The Assessor

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, ZIP	CODE)					
ADDRESS OF EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)					
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED						
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.		Λ.				
3.						
4.						
5.			_			
I hereby state that:						
 (a) The property is brought into this state exclusively for purposes of use or exhibition at an exposition, fair, carnival, or public exhibit of literary, scientific, educational, religious, or artistic works in this state and is used only for these purposes while in this state; (b) I intend to remove the property from the state following its use or exhibition here; (c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the 						
other state or country have been paid. Whom should we contact during normal business hours for additional information?						
FOR ASSESSOR'S USE ONLY						
			ADDRESS (STREET, CITY, STATE, ZIP CODE)			
Received by	(Assessor's designee)					
of	(county or city)		DAYTIME PHONE	NUMBER		
On(date)			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	