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.



John Tuteur Napa County Assessor-Clerk-Recorder 1127 First St Room 128 Napa, CA 94559 PH: (707) 253-4467 FAX: (707) 253-6171

| NAME OF EXHIBITOR | | | | | |
|--|---|---|---|-----------------------------------|--|
| ADDRESS (STREET, CITY, STATE, | ZIP CODE) | | | | |
| ADDRESS OF EXHIBITION (STREE | ET, 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. | NA I | | | - | |
| 4. | | | | | |
| 5. | | | | | |
| exhibit of litera state; (b) I intend to ren (c) The property | is brought into this state exclu ary, scientific, educational, relig nove the property from the state is subject to taxation in some c | ious, or artistic works in th e following its use or exhit | is state and is used only for to bition here; | hese purposes while in this | |
| | country have been paid. | b | Whom should we contact d usiness hours for additiona | | |
| FOR A | SSESSOR'S USE ONLY | NAME | | | |
| Received by | (Assessor's designee) | ADDRESS (STRE | ET, CITY, STATE, ZIP CODE) | | |
| of | | | | | |
| on | | () | () | | |
| | (date) | E-MAIL ADDRESS | , | | |
| | | CERTIFICATION | | | |
| l certify (or declare) u | nder penalty of perjury under t | he laws of the State of Ca | lifornia that the foregoing an | 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

