## 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.



## Matthew R. Maynard Placer County Assessor 2980 Richardson Dr Auburn CA 95603 Phone: 530-889-4300 Fax: 530-889-4305 assessor@placer.ca.gov

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE,	, ZIP CODE)				
ADDRESS OF EXHIBITION (STRE	ET, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL F	PROPERTY FOR WHICH E	KEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STAT <mark>E</mark> OR COUNTRY IN WHICH PAID	
1.					
2.				-	
3.					
4.					
5.					
exhibit of liter state;	is brought into this state exclu ary, scientific, educational, religi nove the property from the state	ous, or artistic works in th	is state and is used only for t		
	is subject to taxation in some o country have been paid.		untry while in this state, and Whom should we contact du pusiness hou <mark>rs</mark> for additional	uring normal	
FOR A	SSESSOR'S USE ONLY	NAME			
Received by		ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
of	(Assessor's designee)				
of(county or city) On			DAYTIME PHONE NUMBER ( )		
(date)		E-MAIL ADDRESS	3		
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			

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

