EF-270-AH-R05-0810-34000321-1 BOE-270-AH REV. 05 (08-10)

## 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.



## CHRISTINA WYNN SACRAMENTO COUNTY ASSESSOR

INSTITUTIONAL EXEMPTIONS SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952 Phone (916) 875-0720 FAX (916) 854-9181 https://assessor.saccounty.gov

NAME OF EXHIBITOR				
ADDRESS (STREET, CITY, STATE	E, ZIP CODE)			
ADDRESS OF EXHIBITION (STR.	EET, BOOTH, ETC.; BE SPECIFIC)			
	LIST ALL PERSONAL	PROPERTY FOR WHICH EX	XEMPTION IS CLAIMED	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID  STATE OR COUNTRY IN WHICH PAID	
1.				
2.				
3.				
4.		VII		
5.				
I hereby state that:				
exhibit of lite state;	rary, scientific, educational, relig	ious, or artistic works in th	se or exhibition at an exposition, fair, carnival, or publis state and is used only for these purposes while in the	
	emove the property from the state is subject to taxation in some of	-	bition here; ountry while in this state, and all current taxes due in t	
	or country have been paid.			
			Whom should we contact during normal pusiness hours for additional information?	
FOR	ASSESSOR'S USE ONLY	NAME	<u> </u>	
		ADDRESS (STREE	ET, CITY, STATE, ZIP CODE)	
Received by	(Assessor's designee)			
of	(county or city)	DAYTIME PHONE	- NI IMPER	
on		( )		
	(date)	E-MAIL ADDRESS		
		CERTIFICATION		
			alifornia that the foregoing and all information hereon, I complete to the best of my knowledge and belief.	
SIGNATURE OF PERSON MAKIN	NG CLAIM	TITLE	DATE	

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

