EF-270-AH-R05-0810-35000137-1 BOE-270-AH REV. 05 (08-10)

EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

TO ADUSHED WILL

San Benito County Assessor 440 Fifth St. Rm. 108 Hollister, CA 95023-3893

Hollister, CA 95023-38 Tel: 831-636-4030 Fax: 831-636-4033

Tom J. Slavich

www.cosb.us/government/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, I	BOOTH, ETC.; BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE 1	TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.					
2.					
3.					
4.					-
5.					
exhibit of literary state; (b) I intend to remove (c) The property is some other state or contact the contact that the contac	v, scientific, educational, religional, religional, religional, religional ve the property from the state subject to taxation in some objuntry have been paid.	ious, or arti	stic works in th its use or exhib or a foreign cou	is state and is used only fo	
FOR ASS	SESSOR'S USE ONLY				
Received by			ADDRESS (STREE	ET, CITY, STATE, ZIP CODE)	
on(county or city)			DAYTIME PHONE NUMBER () E-MAIL ADDRESS		
(auto)					
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