EF-571-M-R06-0806-37000164-1 BOE-571-M (FRONT) REV. 6 (8-06)

_ MISCELLANEOUS PROPERTY STATEMENT

OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20___. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.

, ,	_

Jordan Marks San Diego County Assessor

1600 Pacific Highway, Suite 103 San Diego, CA 92101

Phone: (619) 236-3771

2. LOCATION OF THE PROPERTY:

E-mail: arcc.fgg@sdcounty.ca.gov

(File a separate statement for each location)

Line 5. Enter the cost of your supplies. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. FIXTURES	Code section 408. Attached	schedules are considered to	be part of the statement.		St	reet Address		
Supplies	3. D					ty		
## LOCAL PHONE NUMBER ## LE-Mail Address (optional) File Per						Yes No yes, is the name on your deed		
Email Address (optional)								
Tangible property owned, claimed, possessed, controlled or managed by yout at this legation at 12.0 is a.m., January left between being reported. Inventories are exempt from traxton and should not be reported for 1990 and future yes. DESCRIPTION OF PROPERTY DATE & COST DESCRIPTION OF PROPERTY QUIRED COST SEMARKS DESCRIPTION OF PROPERTY QUIRED COST SEMARKS DESCRIPTION OF PROPERTY A XX X X X X X X X X X X X X X X X X X								
Targible property owned, claimed, possessed, controlled or managed by you at this feation at 1208 a.m., January 1 of the year being reported. Inventories are exempt from taxation and should not be reported for 1980 and future year. Discription of property eligible for the exemption. DESCRIPTION OF PROPERTY QUIRED ONTE RC QUIRED COST QUIRED DESCRIPTION OF PROPERTY S. SUPPLIES X. X					E-	Mail Address (optional)		
Tangible property owned, claimed, possessed, controlled or managed by you at this legation at 120 ia.m., January of the byear being reported. Inventiors are seempt from traxton and should not be reported for 1990 and future years. The property eligible for this exemption. DESCRIPTION OF PROPERTY DATE DESCRIPTION OF PROPERTY DATE COST DESCRIPTION OF PROPERTY QUIRIDD S. SUPPLIES X. X	I						_	
DESCRIPTION OF PROPERTY OURED X X X X X X X A X X X A X X X A X X X B. Equipment degrined since January 1, last year X X X X X X X X B. Equipment acquired since January 1, last year X X X X X X X X A X X X A X X X A X X X B. Equipment disposed of since January 1, last year C. Equipment disposed of since January 1, last year X X X X A X X X A X X X A X X X A X X X A X X X A X X X A X X X A X X X A X X X A X X X A X X X X	the year being reported. In	ventories are exempt from ta	, or manage <mark>d b</mark> y you <mark>at</mark> this le xation and should not be re	ocation at 12: <mark>01</mark> a.m., Ja ported for 1980 and fut	nuary 1 of ture years.	Yes No yes, a separate "Claim fo	or Veterans' Exemptio	
a. Total cost of all equipment held on January 1, last year b. Equipment acquired since January 7 last year c. Equipment disposed of since January 1, last year c. Equipment disposed of since January 1, last year c. Equipment disposed of since January 1, last year c. Equipment disposed of since January 1, last year x x x x x x x x x x x x x x x x x x x	DESC	CRIPTION OF PROPERTY				REMARKS		
a. Total cost of all equipment held on January 1, last year b. Equipment acquired since January 1, last year C. Equipment disposed of since January 1, last year X X X X X X X X A X X X X X X X X X	5. SUPPLIES		XXX	X				
b. Equipment acquired since January 1, last year c. Equipment disposed of since January 1, last year AXXXX XXXX d. Total cost of all equipment held on January 1, this year XXXXX d. Total cost of all equipment held on January 1, this year XXXXX ASXXX ASXXX ASXXX d. Total cost of all equipment held on January 1, this year XXXXX ASXXX ASXXX ASXXX ASXXX ASXXX ASXXX ASXXXX d. Total cost of your supplies. Enter the cost of your supplies. Line 5. Enter the cost of your supplies. Line 5. Line 6. Lite thin distally items acquired or disposed of since January 1 of list year. Add filterial sheets may be attached. The figure to be entered on line of may be computed by adding the figures for line a and b and subtracting size figure for line can be entered on line of may be computed by adding the figure for line can be entered on line of may be computed by adding the figure to be entered on line of may be computed by adding the figures for line can be entered on line of any other personal property at this location. Additional sheets may be attached. Line 8. Describe in detail and show the cost of all additions and retirements to your sundings, or to your leasehold improvements to the buildings of your landiord during the year being reported. De hor repositions that the buildings of your landiord during the year being reported. De hor repositions that the buildings of your landiord during the year being reported. De hor repositions that the buildings of your landiord during the year being reported. De hor repositions that the wear an include and an additions and retirements or other attachments, and to the best of right for your leasehold improvements to the present and the least of California that have examined this property statement, including accompanying schedules, statement and the landing of your property statement. Including accompanying schedules, statement and the landing of your landiord during the retirements or other attachments, and to the best of right for your landiord and the landing o	6. EQUIPMENT		XXX	X X X X X				
c. Equipment disposed of since January 1, last year	a. Total cost of all eq	uipment held on January 1, la	st year X X X	Х				
c. Equipment disposed of since January 1, last year	b. Equipment acquire	ed since January 1, last year	XXX	X XXXX				
d. Total cost of all equipment held on January 1, this year		, ,						
d. Total cost of all equipment held on January 1, this year								
d. Total cost of all equipment held on January 1, this year	c. Equipment dispos	ed of since January 1, last yea	r XXX	X XXXX				
7. OTHER (describe) 8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail) INSTRUCTIONS: Line S. Enter the cost of your supplies. Line S. Enter the cost of your supplies. Line S. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. The figure to be entered on line of may be computed by adding the figures (or line and be additional and shown the cost of all additions and retirements to your buildings, or to your leasehold in provements to the buildings of your landlord during the year being reported. Do not repair lems that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Partnership ORDITION BY ASSESSEE PROCESSING DATA OPERATION DATE ANALYZED COMPUTED ANALYZED COMPUTED ANALYZED COMPUTED ANALYZED SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:								
7. OTHER (describe) 8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail) INSTRUCTIONS: Line S. Enter the cost of your supplies. Line S. Enter the cost of your supplies. Line S. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. The figure to be entered on line of may be computed by adding the figures (or line and be additional and shown the cost of all additions and retirements to your buildings, or to your leasehold in provements to the buildings of your landlord during the year being reported. Do not repair lems that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Partnership ORDITION BY ASSESSEE PROCESSING DATA OPERATION DATE ANALYZED COMPUTED ANALYZED COMPUTED ANALYZED COMPUTED ANALYZED SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:	d Total cost of all eq	uinment held on January 1 th	is year X X X	X				
8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail) INSTRUCTIONS: Line S. Enter the cost of your supplies. Line 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c. Line 7. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Signed. If you do not do so, it may result in penalties. I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachements, and to the best of my knowledge and belief it is corporation correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 NAME OF LEGAL ENTITY (other than DBA) (typed or printed) MAME OF LEGAL ENTITY (other than DBA) (typed or printed) MAME OF LEGAL ENTITY (other than DBA) (typed or printed) MONTH & YEAR MON		alpinent field off Juliatry 1, ti	N A A	^				
INSTRUCTIONS: Line 5. Enter the cost of your supplies. Enter the cost of your supplies. Line 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c. Line 7. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for lines a and b and subtracting the figure for line c. Personal stacked. Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat terms that were included in line 6. DECLARATION BY ASSESSE PROCESSING DATA DATE ANALYZED		EHOLD IMPROVEMENTS:						
Line 5. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line of may be computed by adding the figures for line 6. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Partnership Date Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. Lideclare under penalty of perjury under the laws of the State of California that have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possesses, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 NAME OF ASSESSEE OR AUTHORIZED AGENT* NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:			MONTH &	YEAR				
Line 5. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line of may be computed by adding the figures for line 6. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Partnership Date Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. Lideclare under penalty of perjury under the laws of the State of California that have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possesses, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 NAME OF ASSESSEE OR AUTHORIZED AGENT* NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:				_				
Line 6. List individually items acquired or disposed of since January 1 of last year. Additional sheets may be attached. The figure to be entered on line d may be computed by adding the figures for line s. and b and subtracting the figure for line c. The figure for line c. Describe in detail and show the cost of all additions and retirements to your buildings or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Proprietorship I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 NAME OF ASSESSEE OR AUTHORIZED AGENT* NAME OF LEGAL ENTITY (other than DBA) (typed or printed) Line 8. Line 8. DECLARATION BY ASSESSEE PROCESSING DATA OPERATION BY DATE ANALYZED OPERATION BY DATE ANALYZED COMPUTED ANALYZED COMPUTED APPRAISED APPRAISED APPRAISED APPRAISED APPRAISED BESTONAL PROPERTY FIXTURES (MPROVEMENTS)	INSTRUCTIONS:					TOTAL FULL		
Line 7. Enter the date acquired, cost, and description of any other personal property at this location. Additional sheets may be attached. Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Proprietorship Date Partnership Date Partnership Corporation Dit (acclare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 NAME OF ASSESSEE OR AUTHORIZED AGENT* NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FixTures (MPROVEMENTS) FIXTURES (MPROVEMENTS) FIXTURES (MPROVEMENTS) POPERATION BY DATE OPERATION BY ANALYZED COMPUTED ANALYZED COMPUTED APPRAISED APPRAISED REVIEWED POSTED TO: TAX AREA CODE: BUS. CODE:	Line 6. List individually iter be entered on line	ms acquired or disposed of since d may be computed by adding t	he figures f <mark>or li</mark> nes a and b <mark>and</mark>	subtracting the figure for	line c.		ГУ	
Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat flems that were included in line 6. DECLARATION BY ASSESSEE				neets may be at-	FIXTURES			
DECLARATION BY ASSESSEE OWNERSHIP TYPE (4) Proprietorship								
OWNERSHIP TYPE (4) Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. Proprietorship declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT*	the buildings of you	ir landlord during the year being			e 6.		DOCECCING DAT	ΓΛ.
TYPE (4) signed. If you do not do so, it may result in penalties. Proprietorship declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* DATE DATE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER BUS. CODE:								
Proprietorship I declare under penalty of perjury under the laws of the State of California that I have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* DATE DATE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:		Note: The signed. I	following declaration mu f vou do not do so, it mav	ist be completed and result in penalties.		OPERATION	BY	DATE
Partnership	, ,		, ,		alifornia that I	ANALYZED _		
Statements or other attachments, and to the best of my knowledge and belief it is true, correct, and complete and includes all property required to be reported which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* DATE NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:	_	have examined this property statement, including accompanying schedules,				COMPUTED _		
Which is owned, claimed, possessed, controlled, or managed by the person named as the assessee in this statement at 12:01 a.m. on January 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:						APPRAISED _		
AS THE ASSESSEE IN THIS STATEMENT AT 12.01 A.III. ON JANUARY 1, 20 SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* DATE POSTED TO: NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE TAX AREA CODE: BUS. CODE:		which is owned, claimed, possessed, controlled, or managed by the person named				DEVIEWED.		
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) TITLE NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:					<u></u>			
NAME OF LEGAL ENTITY (other than DBA) (typed or printed) FEDERAL EMPLOYER ID NUMBER TAX AREA CODE: BUS. CODE:			DATE		POSTED TO:			
BUS. CODE:	NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)		TITLE					
	NAME OF LEGAL ENTITY (other than DBA) (typed or printed)		FEDERAL EMPLOYER ID NUMBER					
	PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER ()		TITLE		RO2' CODF:			

*Agent: see back for Declaration by Assessee instructions.

THIS STATEMENT SUBJECT TO AUDIT



DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.

