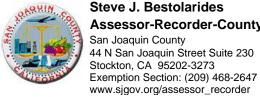
QUALIFIED LESSORS' EXEMPTION CLAIM

PROPERTY USED FOR FREE PUBLIC LIBRARIES AND FREE MUSEUMS AND USED EXCLUSIVELY FOR PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, UNIVERSITY OF CALIFORNIA, AND NONPROFIT COLLEGES



Steve J. Bestolarides Assessor-Recorder-County Clerk San Joaquin County 44 N San Joaquin Street Suite 230 Stockton, CA 95202-3273

| NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address) | Л |
|---|---|
| L | To receive one time reporting treatment for the exemption, this claim must be filed with the Assessor within 120 days of the commencement date of the lease. |
| IDENTIFICATION OF APPLICANT | |
| LESSOR'S CORPORATE OR ORGANIZATION NAME | |
| | |
| CITY, STATE, ZIP CODE | |
| CORPORATE ID (IF ANY) | |
| DENTIFICATION OF PROPERTY | |
| ADDRESS OF PROPERTY (NUMBER AND STREET) | FISCAL YEAR OF CLAIM 20 - 20 |
| CITY, COUNTY, ZIP CODE | ASSESSOR'S PARCEL NUMBER |
| USE OF PROPERTY <i>V</i> Check and state the primary and inciden | tal qualifying uses of the property |
| The exemption claim is made for the following property: (if there ar | |
| PROPERTY TYPE PRI | INCIDENTAL USE |
| Land | |
| Buildings and Improvements | |
| Personal Property | |
| ☐ Yes ☐ No The lease confers upon the lessee the exclusive rig | ht to possession and use of the property. |
| Yes No As used herein a qualifying institution is one whose community college, state college, state university, U | se property qualifies for the free public library, free museum, public school, Iniversity of California, or nonprofit college property tax exemption. |
| Yes No The lessee institution has the option at the end of t (one dollar) or any other nominal sum. | the lease term of acquiring the above property described in the lease for \$1 |
| Important: A lessee's affidavit, in which the lessee attests to the abo will result in denial of one time reporting treatment for the exemption | ove statement(s) is provided. Failure to submit/complete the lessee's affidavit |

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 and correct to the best of my knowledge and belief. | | | | |
|--|-----------------------|--|--|--|
| SIGNATURE OF PERSON MAKING CLAIM | DATE | | | |
| NAME OF PERSON MAKING CLAIM | TITLE | | | |
| EMAIL ADDRESS | DAYTIME TELEPHONE () | | | |
| | | | | |

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



RETURN THIS AFFIDAVIT TO LESSOR

| NAME OF QUALIFYING LESS | | XECUTION BY QUALIFYING INSTI | TUTIONAL LESSEE |
|--|--|---|--|
| MAILING ADDRESS | | | |
| CITY, STATE, ZIP CODE | | | |
| $\overline{\checkmark}$ Check the type of qua | alifying use of the proper | ty | |
| FREE PUBL | IC LIBRARY | COMMUNITY COLLEGE | UNIVERSITY OF CALIFORNIA |
| | EUM | STATE COLLEGE | NONPROFIT COLLEGE |
| PUBLIC SCI | HOOL | STATE UNIVERSITY | |
| NAME OF LESSOR | TH | HSL | <u>SA</u> |
| DATE LEASE SIGNED | | | COMMENCEMENT DATE OF LEASE |
| The following property is etc. Attach a separate lis PROPERTY TYPE (REAL OR PERSONAL) | leased as of January 1 c ting if necessary. | of this year. If personal property is being lea | ISEd, indicate the type, make, model, serial number, |
| | | USE | |
| | see institution has the op llar) or any other nominal | | ng the above property described in the lease for \$1 |

| I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including ar | У |
|---|---|
| accompanying statements or documents, is true and correct to the best of my knowledge and belief. | |

| | () | | |
|----------------------------------|-------------------|--|--|
| EMAIL ADDRESS | DAYTIME TELEPHONE | | |
| | | | |
| NAME OF PERSON MAKING CLAIM | TITLE | | |
| | | | |
| SIGNATURE OF PERSON MAKING CLAIM | DATE | | |

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