EF-571-M-R06-0806-40000137-1 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.

۱.	NAME AND MAILING ADDRESS	(Make necessary corrections to the printed name and mailing address.
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## Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor

County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643 Fax: (805) 781-5641

Email: Assessor@co.slo.ca.us Web Site: slocounty.ca.gov/assessor

(File a separate statement for each location)

2. LOCATION OF THE PROPERTY:

Code section 408. Attached	schedules are considered to	b be part of the statement.		Sti	eet Address			
1. NAME AND MAILING AD	ODRESS (Make necessary co	prrections to the printed name	and mailing address.)	_ Cit	y YOU OWN THE LAND			
				3. <u>D</u> (	YOU OWN THE LAND	AT THIS LOCATION	?	
					Yes No			
					es, is the name on your			
					recorded as shown on this statement.  Yes No			
					CAL PHONE NUMBER			
			E-Mail Address (optional)					
1	RANS:							
					e you filing a claim for	veterans' <mark>exem</mark> ption	?	
Tangible property owned, c	laimed, possessed, controlle	d, or managed by you at this lo	ocation at 12:01 a.m., Janu		Yes No			
Do not report property eligi	ventories are exempt from to ble for this exemption.	axation and should not be rep	ported for 1980 and futur	1119	es, a separate "Claim fo		on" form must be filed	
				wi	th Assessor on or before	e February 15.		
DESC	CRIPTION OF PROPERTY	DATE AC	(0)		REMARKS		ASSESSOR'S	
	THE HOTE WITHOUT ENTITION	QUIREC	)		HEIVINITIO		USE ONLY	
5. SUPPLIES		XXX	X					
6. EQUIPMENT		XXX	X X X X					
a. Total cost of all equ	uipment h <mark>eld</mark> on January 1, l	ast year X X X	X					
b. Equipment acquire	ed since January 1, last year	X X X	X X X X					
c. Equipment dispose	ed of since January 1, last ye	ar XXX	X XXXX					
d. Total cost of all equ	uipment held on January 1, t	his year X X X	x					
7. OTHER (describe)	, , ,							
	HOLD IMPROVEMENTS:							
	nd retirements in detail)	MONTH & Y	/EAR					
INSTRUCTIONS:					TOTAL FULL			
Line 5. Enter the cost of you	and also see want by a see also also	The Garrie to	VALUE					
	nal sheets may be attached. subtracting the figure for lir		PERSONAL PROPERT	v				
Line 7. Enter the date acqu	nis location. Additional shee			'				
tached. Line 8. Describe in detail an	gs, or to your leasehold imp	rovements to	FIXTURES (IMPROVEMENTS)					
the buildings of you	that were included in line 6		THE TRUE (TIE)					
		DECLARATION BY AS	SSESSEE		PROCESSING DATA			
OWNERSHIP	Note: The	following declaration mus	st be completed and		OPERATION	BY	DATE	
TYPE (4)		If you do not do so, it may	•		ANALYZED _			
Proprietorship	vs of the State of Califuding accompanying							
Partnership	t of my knowledge an		COMPUTED _					
Corporation $\Box$	roperty required to b	e reported	APPRAISED _					
Other	or managed by the per January 1, 20	son named	REVIEWED _					
SIGNATURE OF ASSESSEE OR AU		tatement at 12.01 a.m. om	DATE		POSTED TO:			
SIGNATURE OF ASSESSEE OR AU			57.11.2					
NAME OF ASSESSEE OR AUTHOR	RIZED AGENT* (typed or printed)		TITLE					
	(),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
NAME OF LEGAL ENTITY (other t	FEDERAL EMPLOYER ID NUMBER		TAX AREA CODE: _					
			BUS. CODE:					
PREPARER'S NAME AND ADDRESS (typed or printed)  TELEPHONE NUMBER			TITLE		DOS. CODE.			

THIS STATEMENT SUBJECT TO AUDIT



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<sup>\*</sup>Agent: see back for Declaration by Assessee instructions.

## **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.

