EF-270-AH-R05-0810-43000109-1 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.



Lawrence E. Stone Santa Clara County Assessor

Exemption Division 70 W. Hedding St, East Wing, 5th Floor San Jose, CA 95110 Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org www.sccassessor.org

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, ZIP	CODE)				
ADDRESS OF EXHIBITION (STREET, I	BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL F	PROPERTY FOR WHIC	H EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.					
3.	741	\ // F	-//	- /	
4.		VII		-	
5.					
I hereby state that:					
exhibit of literary state; (b) I intend to remove (c) The property is:	r, scientific, educational, religi ve the property from the state	ous, or artistic works	n country while in this state, ar	or these purposes while in this and all current taxes due in the	
			Whom should we contact business hours for addition	during normal nal information?	
FOR ASS	SESSOR'S USE ONLY	NAME			
		ADDRESS (S	STREET, CITY, STATE, ZIP CODE)		
Received by	(Assessor's designee)				
of	(county or city)	DAYTIME PH	HONE NUMBER		
ON(date)		E-MAIL ADD	E-MAIL ADDRESS		
		CERTIFICATION	 I		
			f California that the foregoing a and complete to the best of m		
SIGNATURE OF PERSON MAKING CL		TITLE	,	DATE	
		1			