EF-571-M-R06-0806-43000430-1 BOE-571-M (FRONT) REV. 6 (8-06)

PREPARER'S NAME AND ADDRESS (typed or printed)

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.

1.	NAME AND MAILING ADDRESS	(Make necessary corrections to the printed name and mailing address.)					
	ı						

TELEPHONE NUMBER

Greg Monteverde Acting Assessor

COUNT

Exemption Division 130 W Tasman Drive San Jose, CA 95134

www.sccassessor.org

Ph: (408) 299-6460 FAX: (408) 271-8812 exemptions@asr.sccgov.org

on time will compet the a from other information in required by Code section 4 contained herein will be I disclosed only to the dis Code section 408. Attached	OCATION OF THE PROPERTY: File a separate statement for each location) treet Address							
NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.) — ————————————————————————————————					City			
	OCAL PHONE NUMBER () Mail Address (optional)							
	laimed, possessed, controlled, or managed by ventories are exempt from taxation and sho ble for this exemption.			nuary 1 of Lure years.	RANS: e you filing a claim for your filing a claim for your form of the claim for yes, a separate "Claim for the country of the Assessor on or before the country of the c	r Vet <mark>era</mark> ns' Exemption		
DESC	CRIPTION OF PROPERTY	DATE AC QUIRED			RÉMARKS		ASSESSOR'S USE ONLY	
5. SUPPLIES	XXX	X						
6. EQUIPMENT	XXX							
a. Total cost of all equ	uipment h <mark>eld</mark> on January 1, last year	XXX	X					
h Equipment acquir	ed since January 1, last year	XXX	X X X X X					
D. Equipment acquire	eu since Jahuary P, last year	^^^						
c. Equipment dispos	ed of since January 1, last year	XXX	X XXXX					
d. Total cost of all equ	uipment held on J <mark>anuary 1, this ye</mark> ar	XXX	X					
7. OTHER (describe)								
	EHOLD IMPROVEMENTS: and retirements in detail)	MONTH & Y	'EAR					
					TOTAL FULL			
INSTRUCTIONS: Line 5. Enter the cost of your supplies.					TOTAL FULL VALUE			
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 at-					PERSONAL PROPERT	Y		
tached. Line 8. Describe in detail ar the buildings of you	provements to 6.	FIXTURES (IMPROVEMENTS)						
	DECLARA	TION BY AS	SSESSEE		PROCESSING DATA			
OWNERSHIP TYPE (4)	Trote: The following declaration must be completed and					ВҮ	DATE	
Proprietorship Partnership Corporation Other Other Data 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					ANALYZED COMPUTED APPRAISED REVIEWED			
SIGNATURE OF ASSESSEE OR AU	DATE		POSTED TO:					
NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed)			TITLE					
NAME OF LEGAL ENTITY (other than DBA) (typed or printed)			FEDERAL EMPLOYER ID NU	MBER	TAX AREA CODE:			

THIS STATEMENT SUBJECT TO AUDIT

BUS. CODE:

TITLE



^{*}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.

