NAME OF EXHIBITOR

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.



LESLIE MORGAN ASSESSOR-RECORDER 1450 Court St., Suite 208A Redding, CA 96001-1667 Tel: (530) 225-3636

Intra_County toll free: 1(800)479-8009

ADDRESS (STREET, CITY, STATE, Z	IP CODE)				
ADDRESS OF EXHIBITION (STREET	, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL P	PROPERTY FOR WHICH EX	EXEMPTION IS CLAIMED		
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.					
2.				-	
3.	$\mathbf{N}\mathbf{A}$			-	
4.					
5.					
exhibit of literar state;	s brought into this state exclus ry, scientific, educational, religi	ous, or artistic works in th	his state and is used only for the		
	ove the property from the state subject to taxation in some o	•		all current taxes due in th	
	country have been paid.	ISI	Whom should we contact du	iring normal	
FOR AS	SESSOR'S USE ONLY	NAME	NAME		
Received by		ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
	(Assessor's designee)				
of (county or city)		DAYTIME PHONE	DAYTIME PHONE NUMBER		
ON(<i>date</i>)		E-MAIL ADDRESS	() E-MAIL ADDRESS		
		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, correct and complete to the best of my knowledge and belief.

SIGNATURE OF PERSON MAKING CLAIM	TITLE	DATE			

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

