



**Glenn Zook**  
**Solano County Assessor/Recorder**  
 675 Texas Street Suite 2700  
 Fairfield, CA 94533-6338  
 (707) 784-6210  
<http://www.solanocounty.com/depts/ar>  
[assessor@solanocounty.gov](mailto:assessor@solanocounty.gov)

**MEDIA TRANSMITTAL FORM  
 HOMEOWNERS' EXEMPTION CLAIM RECORDS**

*This form must be completed and included with all media submitted for processing. Submit the form and media to:*

*Board of Equalization  
 County-Assessed Properties Division  
 Homeowners' Exemption Coordinator  
 PO Box 942879 MIC: 64  
 Sacramento, CA 94279-0064*



**STATE OF CALIFORNIA  
 BOARD OF EQUALIZATION**  
[www.boe.ca.gov](http://www.boe.ca.gov)

COUNTY		COUNTY NUMBER	DATE SUBMITTED	
MAILING ADDRESS (STREET ADDRESS OR PO BOX)		CITY	STATE	ZIP
CONTACT PERSON		TELEPHONE ( )	E-MAIL ADDRESS	
MEDIA TYPE <input type="checkbox"/> CD/DVD <input type="checkbox"/> CARTRIDGE <input type="checkbox"/> DISKETTE <input type="checkbox"/> SECURE E-MAIL		FILENAME	FILETYPE <input type="checkbox"/> AH <input type="checkbox"/> FL	
MEDIA TYPE <input type="checkbox"/> CD/DVD <input type="checkbox"/> CARTRIDGE <input type="checkbox"/> DISKETTE <input type="checkbox"/> SECURE E-MAIL		FILENAME	FILETYPE <input type="checkbox"/> AH <input type="checkbox"/> FL	

PROCESS TYPE (IF NEITHER R NOR A IS CHECKED, DATA IS PROCESSED AS NEW)  
 R=RERUN (Overrides previously loaded data)  A=ADDITIONAL (Add more data received)  N=NEW FILE (neither rerun nor additional)

UPDATE	CHECK AS APPLICABLE			
1	<input type="checkbox"/> INITIAL SUBMISSION	<input type="checkbox"/> ALL HOMEOWNERS	<input type="checkbox"/> ALL DISABLED VETERANS	
2	<input type="checkbox"/> PROCESSED MCL #1	<input type="checkbox"/> LATE FILED CLAIMS INCLUDED ON MCL	<input type="checkbox"/> LATE FILED CLAIMS PROVIDED SEPARATELY	<input type="checkbox"/> INCLUDES DISABLED VETERANS
3	<input type="checkbox"/> MCL #2 RETURNED DATA	<input type="checkbox"/> LATE FILED CLAIMS INCLUDED ON MCL	<input type="checkbox"/> LATE FILED CLAIMS PROVIDED SEPARATELY	<input type="checkbox"/> INCLUDES DISABLED VETERANS
FINAL	<input type="checkbox"/> MCL #3 - NO NEW CLAIMS	DO NOT INCLUDE NEW CLAIMS - RETURN PROCESSED MCL ONLY		

NOTES

THIS IS A SAMPLE! DO NOT USE!

**THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION**

