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.



Kathy Scriven Sutter County Assessor

1160 Civic Center Blvd., Suite D Yuba City, CA 95993 Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us

NAME	OF EXHIBITOR						
ADDRE	ESS (STREET, CITY, STATE, Z	IP CODE)					
ADDRE	ESS OF EXHIBITION (STREET	T, BOOTH, ETC.; BE SPECIFIC)			Λ		
	LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED						
	DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STAT <mark>E O</mark> R COUNTRY IN WHICH PAID		
1.							
2.					-		
3.					•		
4.							
5.							
THER	exhibit of literal state; (b) I intend to remo	ry, scientific, educational, relig ove the property from the state	ious, or artistic works in th e following its use or exhit	e or exhibition at an exposition is state and is used only for the pition here; untry while in this state, and a	ese purposes while in this		
		country have been paid.	IS.	Whom should we contact dur usiness hours for additional i	ing normal		
FOR ASSESSOR'S USE ONLY							
Rec	Received by			ADDRESS (STREET, CITY, STATE, ZIP CODE)			
		(Assessor's designee)					
of		(county or city)	DAYTIME PHONE	NUMBER			
on		(date)	E-MAIL ADDRESS				
L			CERTIFICATION				
10	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

