EF-270-AH-R05-0810-03000346-1 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.



James B Rooney Assessor of Amador County

DATE

810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

NAME OF EXHIBITOR				
ADDRESS (STREET, CITY, STATE, Z	ZIP CODE)			
ADDRESS OF EXHIBITION (STREET	T, BOOTH, ETC.; BE SPECIFIC)			
	LIST ALL PERSONAL	PROPERTY FOR WHICH E	XEMPTION IS CLAIMED	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.				
2.		Λ Λ Γ		
3.			71 H	- /
4.		VIII		
5.				
exhibit of literal state; (b) I intend to remove (c) The property is	s brought into this state exclury, scientific, educational, religions ove the property from the states subject to taxation in some country have been paid.	ious, or artistic works in t e following its use or exh	his st <mark>ate and is used only for t</mark> ibition here;	hese purposes while in thi
			Whom should we contact dubusiness hours for additional	
FOR AS	SSESSOR'S USE ONLY	NAME		
		ADDRESS (STRE	EET, CITY, STATE, ZIP CODE)	
Received by	(Assessor's designee)			
(county or city)		, ,	DAYTIME PHONE NUMBER	
ON(date)		E-MAIL ADDRES	E-MAIL ADDRESS	
		CERTIFICATION		
	nder penalty of perjury under t mpanying statements or docur	he laws of the State of Co		

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

TITLE



SIGNATURE OF PERSON MAKING CLAIM