	11 SEAL .	Gus Kramer	
r-269-FIR-R02-0308-07000241-1 DE-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEM ASSESSOR'S FIELD INSPECTION RE		County Assessor 2530 Arnold Drive, Suite 1 Martinez, CA 94553-4359 FAX: (925) 313-7488	
REGULAR ASSESSMENT SUPPLEMENTAL ASSESSMENT	4.000	Telephone: (925) 313-740 http://www.cccounty.us/as	
Information for Property No.			
Name of organization			
Address of <i>this</i> property	(stre	et, city, zip code)	
Owner only Operator only	Owner-Operator Date of last in:	spection of property	
If claimant is owner, name of operator is			
If claimant is operator, name of owner is			
A. Claimant is primarily: (check only one) 1. charitable	□ 2. other (<i>explain</i>)		
B. Use of property			
1. The primary activity the propert			_
 a. administration b. commercial c. educational d. farming m. other (<i>explain</i>) 	 e. fraternal and lodge meet f. fund raising g. hospital h. housing 	ings ings i. medical (not hos j. recreational k. rehabilitation l. informational	spital)
2. Other activities the property is	used for are: a. List letters used in I	B1	
b. Other <i>(explain)</i>			
		a. leased or r <mark>en</mark> ted	
	c. in excess of that re	easonably necessary	d. used to
	e is not institutionally necessary		
 C. Operation of property for bene 1. In your opinion are services and 	expenses excessive?		Yes 🗌 No
If answer is yes , explain: 2. In your opinion do oper <mark>ations en</mark>			Yes 🗌 No
 In your opinion is the claimant's If answer is no, explain: 		any, necessary?	Yes No
D. Ownership of real property (as of a lf answer is no, explain:	applicable lien date) is recorded in e	exact name of claimant	Yes No
		Did owner file an exemption claim?	Yes 🗌 No
 E. Supplemental Assessment (in claim 1. Date of change in ownership 		Recorded	🗌 Yes 🗌 No
Ownership in name of claimant? 2. Date of completion of new const	ruction		
Explain what was constructed —		If only a partian of the n	
3. Date put to exempt use		If only a portion of the p	
		vith Assessor	
		nquent	
F. A claim for veterans' organization		•	
1. was filed last year		🗌 No	
3. was not filed last year, but claime	•		
G. Recommendation: 1. Approval		(give complete address including z	ip code) (all)
	dentify specific area to be denied)		
Date			
	-		
	Ву		, Designe

