EF-571-M-R06-0806-15000195-1 BOE-571-M (FRONT) REV. 6 (8-06)

_ MISCELLANEOUS PROPERTY STATEMENT

OFFICIAL REQUIREMENT

A report submitted on this form is required of you by section 441(a) of the Revenue and Taxation Code (Code). The statement must be completed according to the instructions and filed with the Assessor on or before April 1, 20____. Failure to file it on time will compel the Assessor's Office to estimate the value of your property from other information in its possession and add a penalty of 10 percent as required by Code section 463. This statement is not a public document. The information di: Cc

| 1. | NAME AND MAILING ADDRESS | (Make necessary corrections to the printed name and mailing address.) | | | | | |
|----|--------------------------|---|--|--|--|--|--|
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| | L | — | | | | | |
| | | possessed, controlled, or managed by you at this location at 12:01 a.m., Janual | | | | | |

Laura Avila **Kern County Assessor and Recorder**

1115 Truxtun Avenue Bakersfield CA 93301-4639 (661) 868-3485

| contained by Code section 403. This statement is not a contained herein will be held secret by the Assessor disclosed only to the district attorney, grand jury, a Code section 408. Attached schedules are considered to | (Code section 451); it can nd other agencies specified | be | (Fi Str | CATION OF THE PROP le a separate statemen reet Address | t for each location) | |
|--|---|-------------------------------|-------------------------------|--|---|------------------------|
| 1. NAME AND MAILING ADDRESS (Make necessary cor | rections to the printed name | e and mailing address.) | 3. DC If y rec 4. LC | ty | o AT THIS LOCATION or deed is statement. | ? 'es |
| Tangible property owned, claimed, possessed, controlled the year being reported. Inventories are exempt from tarbo not report property eligible for this exemption. | | | aary 1 of Are years. | RANS: e you filing a claim for Yes No yes, a separate "Claim for th Assessor on or befo | or Vet <mark>era</mark> ns' Exemption | |
| DESCRIPTION OF PROPERTY | DATE AC QUIRED | | | REMARKS | | ASSESSOR'S USE ONLY |
| 5. SUPPLIES | XXX | X | | | | |
| 6. EQUIPMENT | XXX | X X X X X | | | | |
| a. Total cost of all equipment held on January 1, las | X | | | | | |
| b. Equipment acquired since January 1, last year | X X X | x x x x | | | | |
| | | | | | - | |
| | | | | | | |
| c. Equipment disposed of since January 1, last year | XXX | X | | | | |
| d Tatal and of all an impossible lider 1 and 1 a | V.V.V | V | | | | |
| d. Total cost of all equipment held on January 1, th 7. OTHER (describe) | is year X X X | ^ | | | | |
| | | | | | | |
| 8. BUILDINGS OR LEASEHOLD IMPROVEMENTS: (describe additions and retirements in detail) | MONTH & N | /EAR | | | | |
| | | | | | | |
| | | | | | _ | |
| | | | | | | |
| INSTRUCTIONS: | | | | TOTAL FULL VALUE | | |
| Line 5. Enter the cost of your supplies. Line 6. List individually items acquired or disposed of since be entered on line d may be computed by adding t | he figures for lines a and b and | subtracting the figure for li | ne c. | PERSONAL PROPER | TY | |
| Line 7. Enter the date acquired, cost, and description of an tached. | y other personal property at th | nis location. Additional shee | ts may be at- | FIXTURES | | |
| Line 8. Describe in detail and show the cost of all additions the buildings of your landlord during the year being | | | | (IMPROVEMENTS) | | |
| | DECLARATION BY AS | SSESSEE | | | PROCESSING DA | TA |
| | st be completed and | | OPERATION | ВҮ | DATE | |
| _ | you do not do so, it may of perjury under the law | | arnia that I | ANALYZED _ | | |
| _ have examined this n | | | COMPUTED . | | | |
| Partnership statements or other atta | | | APPRAISED | | | |
| which is owned, claime | or managed by the pe | | | | | |
| Other as the assessee in this sta | atement at 12:01 a.m. on | , , | | REVIEWED _ | | |
| SIGNATURE OF ASSESSEE OR AUTHORIZED AGENT* | DATE | | POSTED TO: | | | |
| NAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or printed) | TITLE | | | | | |
| NAME OF LEGAL ENTITY (other than DBA) (typed or printed) | FEDERAL EMPLOYER ID NUM | BER | TAX AREA CODE: | | | |
| PREPARER'S NAME AND ADDRESS (typed or printed) | TITLE | | BUS. CODE: | | | |

THIS STATEMENT SUBJECT TO AUDIT



^{*}Agent: see back for Declaration by Assessee instructions.

DECLARATION BY ASSESSEE

The law requires that this property statement, regardless of where it is executed, shall be declared to be true under penalty of perjury under the laws of the State of California. The declaration must be signed by the assessee, a duly appointed fiduciary, or a person authorized to sign on behalf of the assessee. In the case of a corporation, the declaration must be signed by an officer or by an employee or agent who has been designated in writing by the board of directors, by name or by title, to sign the declaration on behalf of the corporation. In the case of a partnership, the declaration must be signed by a partner or an authorized employee or agent. In the case of a Limited Liability Company (LLC), the declaration must be signed by an LLC manager, or by a member where there is no manager, or by an employee or agent designated by the LLC manager or by the members to sign on behalf of the LLC.

When signed by an employee or agent, other than a member of the bar, a certified public accountant, a public accountant, an enrolled agent or a duly appointed fiduciary, the assessee's written authorization of the employee or agent to sign the declaration on behalf of the assessee must be filed with the Assessor. The Assessor may at any time require a person who signs a property statement and who is required to have written authorization to provide proof of authorization.

A property statement that is not signed and executed in accordance with the foregoing instructions is not validly filed. The penalty imposed by section 463 of the Revenue and Taxation Code for failure to file is applicable to unsigned property statements.



