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.



Brett Frazier Madera County Assessor 200 West 4th Street Madera, CA 93637-3548

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654 www.maderacounty.com/government/assessor

NAME OF EXHIBITOR				
ADDRESS (STREET, CITY, STATE,	ZIP CODE)			
ADDRESS OF EXHIBITION (STREE	ET, BOOTH, ETC.; BE SPECIFIC)			Л
	LIST ALL PERSONAL	PROPERTY FOR WHICH EX	EMPTION IS CLAIMED	
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.				
2.				
3.				-
4.				
5.				
I hereby state that:				
 (a) The property exhibit of litera state; 	is brought into this state exclu ary, scientific, educational, relig	usively for purposes of us jious, or artistic works in th	e or exhibition at an exposi is state and is used only for	tion, fair, carnival, or public these purposes while in this
(b) I intend to rem	nove the property from the stat	e following its use or exhil	pition here;	
	is subject to taxation in some country have been paid.	ICI	untry while in this state, and Whom should we contact d usiness hours for additiona	uring normal
FOR A	SSESSOR'S USE ONLY	NAME		
		ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)	
Received by	(Assessor's designee)			
of(county or city)				
(county or city) ON(date)		()	DAYTIME PHONE NUMBER () E-MAIL ADDRESS	
	(date)	E-WAIL ADDRESS		
		CERTIFICATION		
	nder penalty of perjury under to mpanying statements or docu.			

SIGNATURE OF PERSON MAKING CLAIM

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

