EF-571-M-R06-0806-20000101-1 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 contained herein will be held secret by the Assessor (Code section 451); it can be disclosed only to the district attorney, grand jury, and other agencies specified in Code section 408. Attached schedules are considered to be part of the statement.



Brett Frazier Madera County Assessor

200 West 4th Street Madera, CA 93637-3548 Phone: (559) 675-7710 Fax: (559) 675-7654

2. LOCATION OF THE PROPERTY:

www.maderacounty.com/government/assessor

| Code section 400. Attached schodules are considered to be part of the statement | | | | | | le a separate statement for each location) reet Address | | |
|--|---|--|---|----------------------------|--|---|------------------------|--|
| 1. NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address.) | | | | | | | | |
| Γ | , , | | , | 3. DO If y re- | O YOU OWN THE LAN Yes No Yos, is the name on yo corded as shown on t | D AT THIS LOCATION: bur deed his statement. | es 🗆 No | |
| | | | | | | Mail Address (optional) | | |
| | claimed, possessed, controlled ventories are exempt from ta ible for this exemption. | | | nuary 1 of ure years. | Yes No | or veterans' exemption for Veterans' Exemption ore February 15. | | |
| DESC | CRIPTION OF PROPERTY | DATE A QUIRE | (0) | | REMARKS | | ASSESSOR'S USE ONLY | |
| 5. SUPPLIES X X X | | | X | | | | | |
| 6. EQUIPMENT | X X X X X | | | | | | | |
| a. Total cost of all eq | Х | | | | | | | |
| b. Equipment acquire | X X X X X | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| c. Equipment disposed of since January 1, last year X X X X X X X X X X X X X X X X X X X | | | | | | | | |
| d. Total cost of all eq | uipment held on January 1, th | is year XXX | X | | | | | |
| 7. OTHER (describe) | , -, -, | V | | | | | | |
| 8. BUILDINGS OR LEASI (describe additions at | EHOLD IMPROVEMENTS: nd retirements in detail) | MONTH & | YEAR | | | | | |
| | | | | | | | | |
| be entered on line Line 7. Enter the date acqu tached. | ns acquired or disposed of since d may be computed by adding t uired, cost, and description of ar | he figures f <mark>or li</mark> nes a and b and y other personal property at t | subtracting the figure for his location. Additional sh | line c. eets may be at- | TOTAL FULL VALUE PERSONAL PROPE FIXTURES | RTY | | |
| Line 8. Describe in detail and show the cost of all additions and retirements to your buildings, or to your leasehold improvements to the buildings of your landlord during the year being reported. Do not repeat items that were included in line 6. | | | | | (IMPROVEMENTS) | | | |
| DECLARATION BY ASSESSEE | | | | | PROCESSING DATA | | | |
| OWNERSHIP TYPE (4) | | Note: The following declaration must be completed and signed. If you do not do so, it may result in penalties. | | | | ВУ | DATE | |
| Proprietorship | | | | | ANALYZED | | | |
| Partnership have examined this property statement, including accompanying schedules, statements or other attachments, and to the best of my knowledge and belief it is | | | | | COMPUTED | | | |
| Corporation | | | | | APPRAISED | | | |
| Other | as the assessee in this st | atement at 12:01 a.m. on | January 1, 20 | <u>-</u> · | REVIEWED | | | |
| SIGNATURE OF ASSESSEE OR ALL | 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 NUMBER | | TAX AREA CODE: | | | |
| PREPARER'S NAME AND ADDRESS (typed or printed) TELEPHONE NUMBER () | | | 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.

