EF-270-AH-R05-0810-22000186-1 BOE-270-AH REV. 05 (08-10)

NAME OF EXHIBITOR

## EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

OF COUNTY

**Becky Crafts County of Mariposa Assessor/Recorder** 

4982 10th St P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332 Fax: (209) 966-5719

To receive the full exemption, a claimant must complete and file this form with the Assessor by February 15.

ADDRESS (STREET, CITY, STATE, ZIP CODE)					
ADDRESS OF EXHIBITION (STREET, B	OOTH ETC : RE SPECIEIC)				
ADDRESS OF EXHIBITION (STREET, B	OOTH, ETC., BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED					
DESCRIPTION	DATE ENTERED CALIFORNIA	DATE T	AXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.					
2.		Λ			
3.					
4.					-
5.					
I hereby state that:					
<ul> <li>(a) The property is brought into this state exclusively for purposes of use or exhibition at an exposition, fair, carnival, or public exhibit of literary, scientific, educational, religious, or artistic works in this state and is used only for these purposes while in this state;</li> <li>(b) I intend to remove the property from the state following its use or exhibition here;</li> <li>(c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the other state or country have been paid.</li> </ul>					
Whom should we contact during normal business hours for additional information?					
FOR ASSESSOR'S USE ONLY			NAME		
			ADDRESS (STREET, CITY, STATE, ZIP CODE)		
	Assessor's designee)				
of(county or city)			DAYTIME PHONE NUMBER		
on	(date)		E-MAIL ADDRESS		
CERTIFICATION					
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.					
SIGNATURE OF PERSON MAKING CLA	IM		TITLE		DATE

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION