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.



SUSAN M. RANOCHAK MENDOCINO COUNTY ASSESSOR 501 Low Gap Road, Room 1020 Ukiah, CA 95482 Telephone: (707) 463-4315 Fax: (707) 463-6597

NAME OF EXHIBITOR					
ADDRESS (STREET, CITY, STATE, 2	ZIP CODE)				
ADDRESS OF EXHIBITION (STREE	T, BOOTH, ETC.; BE SPECIFIC)				
	LIST ALL PERSONAL F	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.	NAI			- /	
4.				-	
5.					
exhibit of litera state;	is brought into this state exclu ary, scientific, educational, religi	ous, or artistic works in th	is state and is used only for the		
(c) The property i	nove the property from the state s subject to taxation in some o country have been paid.	ther state or a foreign co		uring normal	
FOR AS	SSESSOR'S USE ONLY	NAME			
Received by	(Assessor's designee)	ADDRESS (STRE	ET, CITY, STATE, ZIP CODE)		
of	(county or city)		NUMBER		
on	(date)	E-MAIL ADDRESS	E-MAIL ADDRESS		
		CERTIFICATION			
L cortify (or doclaro) u	nder penalty of periury under th		lifornia that the foregoing and	d all information hereon	

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 CLAIM	TITLE	DATE
		I

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

