EF-571-M-R06-0806-26000112-1 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.

1.	NAME AND MAILING ADDRESS	(Make necessary corrections to the printed name and mailing address.
	Г	



Mono County Office Of The Assessor Barry Beck, Assessor

PO Box 456

2. LOCATION OF THE PROPERTY:

Bridgeport, CA 93517-0456 Telephone: 760-932-5510 Fax: 760-932-5511

Email: assessor@mono.ca.gov

(File a separate statement for each location)

Website: www.monocounty.ca.gov/assessor

			30	reet Address		
. NAME AND MAILING ADDRESS (Make necessa	y corrections to the printed nam	ne and mailing address.)		YOU OWN THE LAND AT THIS LOCATION?		
				Yes No		
				yes, is the name on your deed	¬ ¬	
				corded as shown on this statement.		
				OCAL PHONE NUMBER()		
			E-l	Mail Address (optional)		
				RANS:		
				e you filing a claim for veterans' exemp	otion?	
angible property owned, claimed, posse <mark>sse</mark> d, conti ne year being reported. Inventories are <mark>ex</mark> empt fro	oll <mark>ed,</mark> or manage <mark>d by you at</mark> this om taxation and should not be re	l <mark>ocation at 12:01</mark> a.m., Jan eported for 1980 and futu	-	Yes No		
o not report property eligible for this exemption.			1119	yes, a separate "Claim for Veterans' Exer th Assessor on or before February 15.	nption" form must be filed	
	DATE		1	division on or before vestuary 13.	ACCECCODIC	
DESCRIPTION OF PROPERTY	DATE A QUIRE	(0)\$1		REMARKS	ASSESSOR'S USE ONLY	
5. SUPPLIES	XXX				OSE ONE!	
6. EQUIPMENT	XXX					
a. Total cost of all equipment held on January						
a. Total cost of all equipment fled on January	1, last year	^				
	W V V	V V V V V				
b. Equipment acquired since January 1, last y	ear X X X	X XXXX				
c. Equipment disposed of since January 1, las	t year X X X	X XXXX				
d. Total cost of all equipment held on January	1, this year X X X	X				
7. OTHER (describe)						
8. BUILDINGS OR LEASEHOLD IMPROVEMENTS (describe additions and retirements in detail)	монтн &	YEAR				
NSTRUCTIONS:				TOTAL FULL		
ine 5. Enter the cost of your supplies.				VALUE		
ine 6. List individually items acquired or disposed o						
be entered on line d may be computed by ad ine 7. Enter the date acquired, cost, and description				PERSONAL PROPERTY		
tached. ine 8. Describe in detail and show the cost of all add	tions and rotiroments to your build	ings or to your lossabold im	arovoments to	FIXTURES		
the buildings of your landlord during the year			(IMPROVEMENTS)			
	DECLARATION BY A	ASSESSEE		PROCESSING DATA		
OWNERSHIP Note:	ust be completed and		OPERATION BY	DATE		
	ed. If you do not do so, it ma			ANALYZED		
have evamined th	nalty of perjury under the la is property statement, inc	ws of the State of Cali	fornia that I			
\Box statements or othe	r attachments, and to the be	est of my knowledge ar	nd belief it is	COMPUTED		
forporation	property required to	be reported	APPRAISED			
Other Which is owned, cl	aimed, possessed, controlled his statement at 12:01 a.m. or	, or managed by the pe 1 January 1, 20	rson named	REVIEWED		
I IGNATURE OF ASSESSEE OR AUTHORIZED AGENT*		DATE		POSTED TO:		
•						
IAME OF ASSESSEE OR AUTHORIZED AGENT* (typed or prin	red)	TITLE				
					<u> </u>	
IAME OF LEGAL ENTITY (other than DBA) (typed or printed)		FEDERAL EMPLOYER ID NUM	ИBER	TAX AREA CODE:		
				BUS. CODE:		
REPARER'S NAME AND ADDRESS (typed or printed)	TELEPHONE NUMBER	TITLE				
	' '	i				

*Agent: see back for Declaration by Assessee instructions.

THIS STATEMENT SUBJECT TO AUDIT



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.



