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.



Cynthia L. Froggatt Plumas County Assessor 1 Crescent Street

1 Crescent Street Quincy, CA 95971 Phone: 530-283-6380 Fax: (530) 283-6195 CindieFroggatt@countyofplumas.com

NAME OF EXH	IBITOR					
ADDRESS (ST	REET, CITY, STATE, ZIP	CODE)				
ADDRESS OF	EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)				
		LIST ALL PERSONAL	PROPERTY FOR WHICH EX	EMPTION IS CLAIMED		
DES	SCRIPTION	DATE ENTERED CALIFORNIA	DATE TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID	
1.						
2.					-	
3.					-	
4.			VII			
5.						
I hereby st	tate that:					
				e or exhibition at an exposit is state and is used only for t		
	,	ve the property from the state	e following its use or exhit	pition here;		
		subject to taxation in some o untry have been paid.	ICI	untry while in this state, and Whom should we contact du usiness hours for additional	uring normal	
	FOR ASS	ESSOR'S USE ONLY	NAME			
			ADDRESS (STREE	ET, CITY, STATE, ZIP CODE)		
Received	d by	(Assessor's designee)				
of		(county or city)				
on			()			
		(date)	E-MAIL ADDRESS			
CERTIFICATION						
l certify	(or declare) und	er penalty of perjury under t	he laws of the State of Ca	lifornia that the foregoing and	d 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				

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

