EF-270-AH-R05-0810-36000137-1 BOE-270-AH REV. 05 (08-10)

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.



Josie Gonzales Assessor-Recorder-County Clerk

County of San Bernardino Assessor's Office 222 W. Hospitality Lane - 4th Floor San Bernardino, CA 92415-0311 www.sbcounty.gov/arc

Phone: (909) 387-8307 Toll Free: (877) 885-7654

NAME OF EXHIBITOR		
ADDRESS (STREET, CITY, STATE, ZIP CODE)		
ADDRESS OF EXHIBITION (STREET, BOOTH, ETC.; BE SPECIFIC) LIST ALL PERSONAL PR	OPERTY FOR WHICH EXEMPTION IS	CLAIMED
DESCRIPTION DATE ENTERED CALIFORNIA	DATE TAXES PAID AMOUNT	OF TAXES PAID STATE OR COUNTRY IN WHICH PAID
1. 2. 3. 4. 5. I hereby state that: (a) The property is brought into this state exclusive exhibit of literary, scientific, educational, religious state; (b) I intend to remove the property from the state for (c) The property is subject to taxation in some other other state or country have been paid.	us, or artistic works in this state and following its use or exhibition here; er state or a foreign country while i	is used only for these purposes while in this
FOR ASSESSOR'S USE ONLY	NAME	
Received by	DAYTIME PHONE NUMBER () E-MAIL ADDRESS	ZIP CODE)
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 CLAIM	TITLE	DATE