SUPPLEMENTAL ASSESSMENT Email: Assessor@co.slo.ca.us Information for Property No. Year: Email: Assessor@co.slo.ca.us Name of organization Address of this property Generation Address of this property Image: State Sta	-269-FIR-R02-0308-40000137-1 E-269-FIR REV. 02 (03-08) VETERANS' ORGANIZATION EXEMI ASSESSOR'S FIELD INSPECTION RE	San Luis Obispo Co County Government Cente 1055 Monterey Street, Suit San Luis Obispo, CA 9340 Telephone (805) 781-5643	Office of Tom J. Bordonaro, Jr. San Luis Obispo County Assessor County Government Center 1055 Monterey Street, Suite D360 San Luis Obispo, CA 93408 Telephone (805) 781-5643	
Name of organization Address of this property		Veer		
Address of this property				//2555501
□ Owner only □ Owner-Operator □ Date of last inspection of property If claimant is owner, name of operator is If claimant is owner is If claimant is operator, name of owner is A Claimant is primarily: □ charitable □ charitable □ charitable If claimant is operator, name of owner is □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable □ charitable	Name of organization			
If daimant is owner, name of overer is If daimant is operator, name of owner is A. Claimant is primarity: (check only one) 1. charitable 2. other (explain) B. Use of property 1. The primary activity the property is used for is: (check only one) i. the primary activity the property is used for is: (check only one) a. administration if fund raising i. the primary activity the property is used for is: (check only one) b. commercial f. fund raising i. the relativity is the property is used for are: a. List letters used in B1 b. Other (explain) S. All or part (where adplicable) or the property is: a. leased or rented d. us house presende is not institutionally necessary c. Operation of property for benefit of persons i. necess of that reasonably necessary d. us house presende is not institutionally necessary? 1. In your opinion are services and expenses exclessive? i. reasonably necessary? Yes if answer is yes, explain: 2. Operation of property (are benefit of persons i. records of necessary? Yes if answer is yes, explain: b. Ownership of neal property (as de applicable lien date) is recorded in exact name of claimant Yes if answer is yes, explain: c. Ownership of neal property (as de applicable lien date) is recorded in exact name of claimant Yes if answer is no, explain:	Address of this property	(stre	et, city, zip code)	
If claimant is operator, name of owner is A. Claimant is primarity: (check only one) 1. The primary activity the property is used for is: (check only one) a. administration afministration b. commercial 1 fund raising c. educationali 9, hospital c. educationali 9, hospital c. educationali 9, hospital c. educationali 9, hospital d. farming 1. housing d. draming 1. housing d. other explain) 3. All or part (white in all or part where applicable) of the property is: a leased or rented b. Vacant or unused c. in excess of that reasonably necessary b. vacant or unused c. in excess of that reasonably necessary c. Operation of property for benefit of persons 1. In your opinion are services and expenses excessive? If answer is yes, explain: 2. 2. In your opinion is the claimant's proposed new capital investment, if any, necessary? Yes If answer is yes, explain: Did owner file an exemption claim? Yes Downership of real property (as of applicable lien date) is recorded in exact name of claimant Yes Mes If answer is yes, explain: Did owner file an exemption claim? Ye		Owner-Operator Date of last ins	spection of property	
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G. Recommendation: 1. Approval (all) 2. Denial (part) (all) (all) (all)		•		
Reason for denial (if partial denial, identify specific area to be denied)			(give complete address including zij	,
		lentify specific area to be denied)		
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