EF-270-AH-R05-0810-48000088-1 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.



## Glenn Zook Solano County Assessor/Recorder

675 Texas Street Suite 2700 Fairfield, CA 94533-6338 (707) 784-6210 http://www.solanocounty.com/depts/ar assessor@solanocounty.gov

NAME OF EXHIBITOR					
ADDDESS (OTDEET OUT) OTATE ZID	0005)				
ADDRESS (STREET, CITY, STATE, ZIP	CODE)				
ADDRESS OF EXHIBITION (STREET, E	BOOTH, ETC.; BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY 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.		VII			
5.					
I hereby state that:					
exhibit of literary state; (b) I intend to remove (c) The property is s	brought into this state excluse, scientific, educational, religion ve the property from the state subject to taxation in some of	ous, or artistic works in thi following its use or exhib	s state and is used only for t ition here;	hese purposes while in this	
other state or co	untry have been paid.		Whom should we contact during normal business hours for additional information?		
FOR ASS	ESSOR'S USE ONLY	NAME	<i>:</i>		
		ADDRESS (STREE	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
Received by					
	(Assessor's designee)				
Of(county or city)		DAYTIME PHONE I	DAYTIME PHONE NUMBER		
on		( )	( )		
(date)		E-MAIL ADDRESS	E-MAIL ADDRESS		
		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	

