EF-261-D-R02-0810-51000034-1 BOE-261-D (P1) REV. 02 (08-10)

SERVICEMEMBERS CIVIL RELIEF ACT **DECLARATION**

Pursuant to section 571(d) of the Servicemembers Civil Relief Act (50 U.S.C. Appendix), the personal property of a servicemember shall not be deemed to be located or present in, or to have a situs for taxation in, the tax jurisdiction in which the servicemember is serving in compliance with military orders.

Kathy Scriven Sutter County Assessor

1160 Civic Center Blvd., Suite D Yuba City, CA 95993

Phone Number: (530) 822-7160 Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us

| SERVICEMEMBER NAME | | | DAYTIME TELEPHONE NUMBER |
|------------------------|--|--|---|
| | | | |
| RANK | ORGANIZATION | SOCIAL SECURITY OR SERIAL NUMBER | E-MAIL ADDRESS |
| MAILING ADDRESS | | CITY | STATE ZIP CODE |
| | | | |
| LEGAL RESIDENCE ADDRE | ESS | CITY | STATE ZIP CODE |
| VOTER REGISTRATION CIT | TY | COUNTY | STATE YEAR LAST VOTED |
| LIST BEI | LOW ANY PERSONAL PR | OPERTY OR MANUFACTURED HOM | ME LOCATED IN CALIFORNIA. |
| | | PERSONAL PROPERTY | |
| PROP | ERTY TYPE | DESCRIPTION | SERIAL/ID NUMBER |
| 11101 | LICITIFIC | BESSIAI HOIV | SERIALID ROMBER |
| | | | |
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| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | MANUFACTURED HOME | |
| MA | NUFACTURER | YEAR OF MANUFACTURE | DECAL/SERIAL NUMBER |
| 117 | AND THE POPULATION OF THE POPU | 124 (5.7 // 4.10.1. (5.7 6.1. 2 | BEG KE GET KIN KE ITGINIBET (|
| | | | |
| INSTRUCTIONS: | | | <u>*</u> |
| 1. List personal | property by type, description | on, and serial number or ID number. | |
| 2. Enter the mar | Enter the manufacturer, year of manufacture, and decal or serial number of a manufactured home. | | |
| 3. Attach a copy | Attach a copy of your current leave and earnings statement. | | |
| 4. Sign and date | e the declaration. If you are | signing this document with Power of A | Attorney, attach a copy of the document |
| | n you have been granted th | | |
| 5. Mail the origin | nal declaration with attachn | nents to the Assessor's office at the ac | ddress shown. |
| | | CERTIFICATION | |
| | | he laws of the State of California that the fore I correct to the best of my knowledge and be | egoing and all information hereon, including any lief. |
| SIGNATURE OF DECLARAN | | | DATE |

DATE