	ER CO	Kathy Scriven
-263-в-R02-0810-51000332-1 Е-263-В (Р1) REV. 02 (08-10) LESSEES' EXEMPTION CLAIM		Sutter County Assessor 1160 Civic Center Blvd., Suite D Yuba City, CA 95993
Declaration of property information as of 12:01 a.m.,	Contraction of the contraction o	Phone Number: (530) 822-7160
January 1, 20	CALIFORNIA	Fax Number: (530) 822-7198 Email: assessor@co.sutter.ca.us
PROPERTY <b>USED EXCLUSIVELY FOR</b> PUBLIC SCHOOLS, COMMUNITY COLLEGES, STATE COLLEGES, STATE UNIVERSITIES, OR		
UNIVERSITY OF CALIFORNIA NAME AND MAILING ADDRESS (Make necessary corrections to the printed name and mailing address)		
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		To an a first that following the state of th
L		To receive the full exemption, this claim must be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		
LESSEE'S CORPORATE OR ORGANIZATION NAME		
MAILING ADDRESS		
CITY, STATE, ZIP CODE		
CORPORATE ID (IF ANY)		
IDENTIFICATION OF PROPERTY		
ADDRESS OF PROPERTY (NUMBER AND STREET)		
CITY, COUNTY, ZIP CODE		ASSESSOR'S PARCEL NUMBER
USE OF PROPERTY Check and state the primary and inc		
The exemption claim is made for the following property: (if the prope	ere are num <mark>erou</mark> s propert arty and the <mark>name</mark> and an	
PROPERTY TYPE	PRIMARY USE	
Land		
Buildings and Improvements		_
Personal Property		
☐ Yes ☐ No Does the lease/agreement confer upon the les	see the exclusive right to	possession and use of the property?
		by a public school, community college, state college, ommunity college, state college, state university, or
Note: If requested by the assessor, the claimant shall provide a	a copy of the lease or agr	eement
I certify (or declare) under penalty of perjury under the laws of t		t the foregoing and all information hereon. including any
accompanying statements or documents,		

SIGNATURE OF PERSON MAKING CLAIM	DATE
NAME OF PERSON MAKING CLAIM	TITLE
E-MAIL ADDRESS	DAYTIME TELEPHONE
	( )

## THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION

