SIGNATURE OF PERSON MAKING CLAIM

## EXHIBITION EXEMPTION CLAIM FROM PROPERTY TAXES

To receive the full exemption, this claim must be filed by 5:00 p.m., February 15.

NAME	OF EXHIBITOR					
ADDR	RESS (STREET, CITY, STATE, Z	IP CODE)				
ADDR	ESS OF EXHIBITION (STREET,	, BOOTH, ETC.; BE SPECIFIC)				
LIST ALL PERSONAL PROPERTY FOR WHICH EXEMPTION IS CLAIMED						
	DESCRIPTION	DESCRIPTION DATE ENTERED CALIFORNIA		TAXES PAID	AMOUNT OF TAXES PAID	STATE OR COUNTRY IN WHICH PAID
1.						
2.						
3.						
4.						
5.						
I he	reby state that:					
	(a) The property is brought into this state exclusively for purposes of use or exhibition at an exposition, fair, carnival, or publ exhibit of literary, scientific, educational, religious, or artistic works in this state and is used only for these purposes while in th state;					
	(b) I intend to remove the property from the state following its use or exhibition here;					
	(c) The property is subject to taxation in some other state or a foreign country while in this state, and all current taxes due in the other state or country have been paid.					
	Whom should we contact during normal business hours for additional information?					
	FOR ASSESSOR'S USE ONLY			NAME		
Received by			ADDRESS (STREE	ET, CITY, STATE, ZIP CODE)		
of		(county or city)		DAYTIME PHONE I	NUMBER	
on	, , ,			( ) E-MAIL ADDRESS		
		(uate)		E WAILADDINESS		
			CERTI	FICATION		

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information herein, including any accompanying statements or materials, is true, correct and complete to the best of my knowledge and belief.

DATE