BOE-263-B (P1) REV. 02 (08-10)

LESSEES' EXEMPTION CLAIM

Declaration of property information as of 12:01 a.m., January 1, 20__.

PROPERTY **USED EXCLUSIVELY FOR** 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)

I		To receive the full exemption, this claim must be filed with the Assessor by February 15.
IDENTIFICATION OF APPLICANT		oe med with the Assessor by February 10.
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 pri	imary and incidental qualifying uses of the	property
The exemption claim is made for the following prop		please attach a list that clearly identifies the
PROPERTY TYPE	PRIMARY USE	INCIDENTAL USE
Land		
☐ Buildings and Improvements		
☐ Personal Property		
Yes No Does the lease/agreement confer	upon the lessee the exclusive right to poss	session and use of the property?
	alifornia that is used exclusively for commu	public school, community college, state college, unity college, state college, state university, or
Note: If requested by the assessor, the claimant sh	nall provide a copy of the lease or agreeme	ent.
	CERTIFICATION	
	the laws of the State of California that the r documents, is true and correct to the bes	foregoing and all information hereon, including any at of my knowledge and belief.
SIGNATURE OF PERSON MAKING CLAIM		DATE
NAME OF PERSON MAKING CLAIM		TITLE
E-MAIL ADDRESS		DAYTIME TELEPHONE