



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

• To be filed with your county treasurer.
• Read instructions on reverse side.

FORM
457

Applicant's Name Catholic Social Services			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify): _____
Street or Other Mailing Address 2241 O Street		County Lancaster	
City Lincoln	State NE	Zip Code 68510	State Where Incorporated Nebraska

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION	
Title	Name, Address, City, State, Zip Code
President	Bishop James D. Conley, 3400 Sheridan Avenue, Lincoln, NE 68508
Vice President	Msgr. Timothy J. Thorburn, 3400 Sheridan Avenue, Lincoln, NE 68508
Secretary	Rev. Christopher K. Kubat, 2241 O Street, Lincoln, NE 68510
Treasurer	William Meduna, 2241 O Street, Lincoln, NE 68510

DESCRIPTION OF THE MOTOR VEHICLES • Attach an additional sheet, if necessary.				
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Buick	1998	LeSabre	1G4HP52K1WH422813	3/1/18

Exempt Uses of Motor Vehicle:

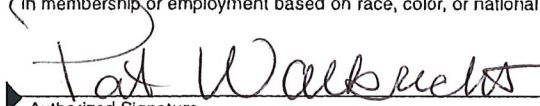
Agricultural/Horticultural Educational Religious Charitable Cemetery

Are the motor vehicles used exclusively as indicated?
 YES NO

If No, give percentage of exempt use:
_____ %

Give detailed description of use, including an explanation if multiple use classifications exist:
This vehicle will be used to take clients to and from appointments.

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

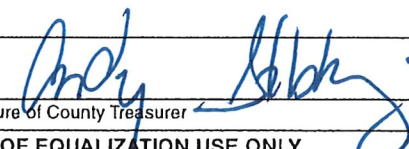
sign here  Executive Assistant 3/1/18

Authorized Signature Title Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL COMMENTS: _____

DISAPPROVAL _____

 4-2-18

Signature of County Treasurer Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL COMMENTS: _____

DISAPPROVAL _____

Authorized Signature Date

PLEASE RETAIN A COPY FOR YOUR RECORDS.

Received Time Mar. 27. 2018 4:38PM No. 3208



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

FORM 457

• To be filed with your county treasurer.
• Read instructions on reverse side.

Applicant's Name Catholic Social Services			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify):
Street or Other Mailing Address 2241 O Street		County Lancaster	
City Lincoln	State NE	Zip Code 68510	State Where Incorporated Nebraska

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION	
Title	Name, Address, City, State, Zip Code
President	Bishop James D. Conley, 3400 Sheridan Avenue, Lincoln, NE 68508
Vice President	Msgr. Timothy J. Thorburn, 3400 Sheridan Avenue, Lincoln, NE 68508
Secretary	Rev. Christopher K. Kubat, 2241 O Street, Lincoln, NE 68510
Treasurer	William Meduna, 2241 O Street, Lincoln, NE 68510

DESCRIPTION OF THE MOTOR VEHICLES • Attach an additional sheet, if necessary.				
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Buick	1998	Lesabre Custom	1G4HP52K1WH422813	3/12/18

Exempt Uses of Motor Vehicle:

Agricultural/Horticultural Educational Religious Charitable Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

This vehicle will be used to transport clients and staff to scheduled appointments and for errands.

Are the motor vehicles used exclusively as indicated?

YES NO

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here Pat Walbrecht Executive Assistant 3/13/18
Authorized Signature Title Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL COMMENTS: _____

DISAPPROVAL

Andy Stibkey Signature of County Treasurer 3-23-18 Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL COMMENTS: _____

DISAPPROVAL

_____ Authorized Signature _____ Date

PLEASE RETAIN A COPY FOR YOUR RECORDS.

Deb



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

**FORM
457**

- To be filed with your county treasurer.
- Read instructions on reverse side.

Applicant's Name The Catholic Bishop of Lincoln			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify): _____
Street or Other Mailing Address 3400 Sheridan Boulevard		County Lancaster	
City Lincoln	State NE	Zip Code 68506	State Where Incorporated Nebraska

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
President	James D. Conley, 3400 Sheridan Blvd., Lincoln, NE 68506
Vice-President	Timothy J. Thorburn, 3400 Sheridan Blvd., Lincoln, NE 68506
Secretary-Treasurer	Daniel J. Rayer, 3400 Sheridan Blvd., Lincoln, NE 68506
Director	Mark D. Huber, 3400 Sheridan Blvd., Lincoln, NE 68506

DESCRIPTION OF THE MOTOR VEHICLES
• Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Buick Lacrosse	2006	4 Door Sedan	2G4WC582061110673	April 2017
Ford F150	1999	Pickup	1FTZF1821XKB91671	April 2017
Honda Odyssey	1999	Van	2HKRL185XXH517954	April 2017
Eagle	1993	Utility Trailer	102290955	April 2017

Exempt Uses of Motor Vehicle:

Agricultural/Horticultural
 Educational
 Religious
 Charitable
 Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

These vehicles are used by the Chancery staff in pursuance of the educational, religious, charitable and administrative endeavors of the Diocese of Lincoln which covers all the territory in Nebraska south of the Platte River.

Are the motor vehicles used exclusively as indicated?

YES NO

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here

[Signature]
Authorized Signature

Vice-President

3/27/18

Title

Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL

COMMENTS: _____

DISAPPROVAL

[Signature] **4-2-18**
Signature of County Treasurer Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

COMMENTS: _____

DISAPPROVAL

Authorized Signature Date

[Handwritten mark]



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

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**FORM
457**

Applicant's Name The Catholic Bishop of Lincoln			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify): _____
Street or Other Mailing Address 3400 Sheridan Boulevard		County Lancaster	
City Lincoln	State NE	Zip Code 68506	
State Where Incorporated Nebraska			

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION	
Title	Name, Address, City, State, Zip Code
President	James D. Conley, 3400 Sheridan Blvd., Lincoln, NE 68506
Vice-President	Timothy J. Thorburn, 3400 Sheridan Blvd., Lincoln, NE 68506
Secretary-Treasurer	Daniel J. Rayer, 3400 Sheridan Blvd., Lincoln, NE 68506
Director	Mark D. Huber, 3400 Sheridan Blvd., Lincoln, NE 68506

DESCRIPTION OF THE MOTOR VEHICLES • Attach an additional sheet, if necessary.				
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Buick Lucerne CX	2008	4 Door Sedan	1G4HP57278U187157	April 2017 2018
Carry-on	2007	Utility Trailer	4YMUL06197M040523	April 2017 2018
Chevrolet Impala	2005	4 Door Sedan	2G1WF52E159262887	April 2017 2018

Exempt Uses of Motor Vehicle:

Agricultural/Horticultural Educational Religious Charitable Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

These vehicles are used by the Chancery staff in pursuance of the educational, religious, charitable and administrative endeavors of the Diocese of Lincoln which covers all the territory in Nebraska south of the Platte River.

Are the motor vehicles used exclusively as indicated?

YES NO

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here  _____ Vice-President 3/27/2018
Authorized Signature Title Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL COMMENTS: _____

DISAPPROVAL _____

 _____ Date **4-2-18**
Signature of County Treasurer Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL COMMENTS: _____

DISAPPROVAL _____

Authorized Signature Date



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

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**FORM
457**

Applicant's Name Christ Place Church			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify): _____
Street or Other Mailing Address 1111 Old Cheney		County Lancaster	
City Lincoln	State NE	Zip Code 68512	State Where Incorporated NE

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
President	Rick Lommer 6052 Chartwell Ln Lincoln NE 68516
Secretary	Cle Mangrum 3117 N. 64th St Lincoln NE 68507
Treasurer	Chet Bennetts 12121 West Denton Road Denton NE 68339
Director	Mark Balschweid 900 Plum Ridge Road Lincoln NE 68527

DESCRIPTION OF THE MOTOR VEHICLES
• Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
MNFD	1995	Trailer	1WC200D1S1066739	March 2018
THOM	1997	Bus	1T7HT3B2XV1155556	
FORD	1999	VAN	1FB5S31L4XHB81147	
FORD	1999	VAN	1FB5S31L5XHB35830	

Exempt Uses of Motor Vehicle:

Agricultural/Horticultural
 Educational
 Religious
 Charitable
 Cemetery

Are the motor vehicles used exclusively as indicated?
 YES NO

Give detailed description of use, including an explanation if multiple use classifications exist:
for transporting people and luggage to religious events

If No, give percentage of exempt use: _____%

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here Jerry Law Senior Associate 3-19-18
Authorized Signature Title Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL COMMENTS: _____

DISAPPROVAL

Andy Stobbing 4-2-18
Signature of County Treasurer Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL COMMENTS: _____

DISAPPROVAL

Authorized Signature Date



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

FOR
457

• To be filed with your county treasurer.
• Read instructions on reverse side.

Applicant's Name Cornhusker Council, Boy Scouts of America			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify) _____
Street or Other Mailing Address PO Box 269		County Lancaster	
City Walton	State NE	Zip Code 68461	State Where Incorporated Nebraska

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
President	Chris Hove, 2402 Ridge Road, Lincoln, NE 68512
Treasurer	Richard Kohel, 1540 Skyline Dr, Lincoln, NE 68506
Secretary	Chris Blum, 1530 N 87th St, Lincoln, NE 68505

DESCRIPTION OF THE MOTOR VEHICLES

• Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Carry-On Trailer Corporation	2015	Cargo Trailer	4YMCL1011FM016158	04/30/2017
Carry-On Trailer Corporation	2015	Cargo Trailer	4YMCL1013FM016128	04/30/2017
HMDE (Trailer)	1995	Utility Trailer		04/30/2017

Exempt Uses of Motor Vehicle:
 Agricultural/Horticultural
 Educational
 Religious
 Charitable
 Cemetery

Are the motor vehicles used exclusively as indicated?

YES NO

Give detailed description of use, including an explanation if multiple use classifications exist:

All uses are Scouting related

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here

Chris Blum
Authorized Signature

Executive Director

Title

03/08/2018

Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL

COMMENTS: _____

DISAPPROVAL

Andy Shobry
Signature of County Treasurer

3-23-18

Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

COMMENTS: _____

DISAPPROVAL

Authorized Signature

Date

Dt



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

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FORM
457

Applicant's Name Cornhusker Council, Boy Scouts of America			Type of Ownership <input checked="" type="checkbox"/> Nonprofit Corporation <input type="checkbox"/> Other (specify): _____
Street or Other Mailing Address PO Box 269, 600 S 120th Street		County Lancaster	
City Walton	State NE	Zip Code 68461-0269	State Where Incorporated NE

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
President	Chris Hove, 2402 Ridge Road, Lincoln, NE 68512
Treasurer	Richard Kohel, 1540 Skyline Dr, Lincoln, NE 68506
Secretary	Chris Blum, 1530 N 87th St, Lincoln, NE 68505

DESCRIPTION OF THE MOTOR VEHICLES

• Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Dodge	2015	Truck	3C63RRGL0FG523425	04/30/2017
Dodge	2015	Van	2C4RDGBG9FR530271	04/30/2017
Dodge	2015	Van	2C4RDGBG0FR530272	04/30/2017
H & H Trailer	2007	Gooseneck Trailer	4J6H025247B086702	04/30/2017
Flatbed Trailer	2001	4-Wheel Flatbed	4160LF18241B031902	04/30/2017

Exempt Uses of Motor Vehicle:
 Agricultural/Horticultural
 Educational
 Religious
 Charitable
 Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

Are the motor vehicles used exclusively as indicated?

YES NO

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here

Chris Blum
Authorized Signature

Executive Director

Title

03/08/2018

Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL

COMMENTS: _____

DISAPPROVAL

Andy Stibbe
Signature of County Treasurer

3-23-18
Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

COMMENTS: _____

DISAPPROVAL

Authorized Signature

Date

DB



Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

To be filed with your county treasurer.
Read instructions on reverse side.

FORM 457

Applicant's Name: **Developmental Services of Nebraska, Inc**

Street or Other Mailing Address: **5701 Thompson Creek Blvd, Ste 200**

City: **Lincoln** State: **NE** Zip Code: **68516**

County: **Lancaster** State Where Incorporated: **Nebraska**

Type of Ownership

Nonprofit Corporation

Other (specify): _____

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
VP	Justin Gulbrandson, 5701 Thompson Creek Blvd, Ste, 200, Lincoln, NE 68516
CEO	Brian Kanier
ODO	Roger Stortenbecker

DESCRIPTION OF THE MOTOR VEHICLES

Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, If Newly Purchased
see attached list				

Exempt Uses of Motor Vehicle:

Agricultural/Horticultural Educational Religious Charitable Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

Are the motor vehicles used exclusively as indicated?

YES NO

If No, give percentage of exempt use: _____ %

Vehicle used to transport persons with developmental disabilities, staff, and administration from work, school, or appointments

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here

Roger Stortenbecker
Authorized Signature

ODO
Title

3/27/18
Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL

DISAPPROVAL

COMMENTS: _____

Andy Stibbing
Signature of County Treasurer

4-2-18
Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

DISAPPROVAL

COMMENTS: _____

Authorized Signature

Date

[Handwritten mark]

		Model	VIN	New Licence	Color
2008	Dodge	Grand Caravan SE	1D8HN44H98B177269	2056	White
2008	Chevrolet	Uplander	1GNDU23W88D180874	2089	Tan
2014	Dodge	Grand Caravan SE	2C4RDGBG9ER276513	2090	White
2006	Dodge	Grand Caravan sxt	2D4GP44L58R865462	2091	White
2014	Dodge	Grand Caravan SE	2C4RDGBG4ER365857	2092	Dark Blue
2014	Ford	Fusion	3FA6P0HD2ER247935	2093	White
2015	Ford	Fusion	3FA6P0H73FR293785	2094	White
2014	Dodge	Grand Caravan SE	2C4RDGBG6ER365858	2095	Black
2014	Dodge	Grand Caravan SE	2C4RDGBGXER261566	2096	White
2014	Dodge	Grand Caravan SE	2C4RDGBG9ER227702	2098	Silver
2014	Dodge	Grand Caravan SE	2C4RDGBG7ER226189	2099	Tan
2014	Dodge	Grand Caravan SE	2C4RDGBG3ER227288	2100	Dark Blue
2014	Dodge	Grand Caravan SE	2C4RDGBG1ER328295	2153	White
2014	Dodge	Grand Caravan SE	2C4RDGBG0ER365855	2154	Dark Blue
2014	Ford	F 150 STX	1FTFX1EF4EKE38833	2155	White
2014	Ford	F 150 STX	1FTFX1EF3EFB76666	2156	White
2014	Dodge	Grand Caravan SE	2C4RDGBGXER129181	2157	Tan
2014	Dodge	Grand Caravan SE	2C4RDGBG3ER328296	2158	Maroon
2014	Dodge	Grand Caravan SE	2C4RDGBG2ER308704	2159	White
2014	Dodge	Grand Caravan SE	2C4RDGBG1ER226625	2160	Silver
2014	Dodge	Grand Caravan SE	2C4RDGBG6ER317101	2161	White
2014	Dodge	Grand Caravan SE	2C4RDGBG5ER273995	2162	Silver
2014	Dodge	Grand Caravan SE	2C4RDGBG1ER187308	2163	Tan
2014	Dodge	Grand Caravan SE	2C4RDGBG7ER339852	2164	Maroon
2014	Dodge	Grand Caravan SE	2C4RDGBG8ER365859	2165	White
2014	Dodge	Grand Caravan SE	2C4RDGBG9ER328044	2166	Dark Blue
2014	Dodge	Grand Caravan SE	2C4RDGBG2ER365856	2167	Dark Blue
2014	Ford	Fusion	3FA6POG73ER103273	2168	Black
2014	Dodge	Grand Caravan SE	2C4RDGBG4ER166940	2169	Gray
2014	Dodge	Grand Caravan SE	2C4RDGBG7ER340869	2170	Maroon
2014	Dodge	Grand Caravan SE	2C4RDGBG7ER331511	2171	Black
2014	Dodge	Caravan	2C7WDGBG4ER220324	2172	White
1996	GMC	Topkick	1GDJ7H1M2TJ505323	2173	
2016	Ford	Fusion	3FA6P0H77GR303641	2175	White
2016	Dodge	Braun	2C7WDGBG4GR1955111	2176	White
2017	Dodge	Grand Caravan SE	2C4RDGBXHR618944	2197	White
			Trailer	XPI 653	



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• Read instructions on reverse side.

FORM
457

Applicant's Name
First Evangelical Free Church

Street or Other Mailing Address
3280 S 84th Street

City
Lincoln

State
NE

Zip Code
68506

County
Lancaster

State Where Incorporated
Nebraska

Type of Ownership

Nonprofit Corporation

Other (specify): _____

IDENTIFY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION

Title	Name, Address, City, State, Zip Code
Elder Board, Chairman	Justin Schulz, 7550 Plum Creek Dr, Lincoln NE 68516
Elder Board, Secretary	Michael Courtney, 3731 N 62nd St, Lincoln, NE 68507
Elder Board, Treasurer	Dennis Florom, 7200 S 42nd St, Lincoln, NE 68516

DESCRIPTION OF THE MOTOR VEHICLES

• Attach an additional sheet, if necessary.

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Dodge Ram Truck	2007	2500 ST/SLT	3D7KS26D57G800667	March, 2018
Manufactured 5' x 8' Trailer	1994		99543930	March, 2018
Ford Cutaway Van	2000	4DC	1FDXE45S3YHB64448	March, 2018
Manufactured Trailer	2000	Enclosed Cargo	4X4TSE412YN020704	March, 2018

Exempt Uses of Motor Vehicle:

- Agricultural/Horticultural Educational Religious Charitable Cemetery

Give detailed description of use, including an explanation if multiple use classifications exist:

General hauling of materials for church purposes

Are the motor vehicles used exclusively as indicated?

- YES NO

If No, give percentage of exempt use:

_____ %

Under penalties of law, I declare that I have examined this application and that it is, to the best of my knowledge and belief, true, complete, and correct. I also declare that I am duly authorized to sign this exemption application, and that the organization owning the above-listed property does not discriminate in membership or employment based on race, color, or national origin.

sign here

Carolyn Meter
Authorized Signature

Financial Administrative Assistant
Title

3/19/18
Date

FOR COUNTY TREASURER RECOMMENDATION

APPROVAL

COMMENTS: _____

DISAPPROVAL

Andy Hobbie
Signature of County Treasurer

3-23-18
Date

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

COMMENTS: _____

DISAPPROVAL

Authorized Signature

Date

DK