	App om Motor Vehic	lication for le Taxes by Qua • To be filed with • Read Instruction	alifying N your county ns on revers	lonprofit Organizatio treasurer. se side.	ons	FORM 457
Name of Organization	- May oh	uch	Type of O		r (specify):	
Immaculate Heast & Name of Owner of Property	7 wasy en	WEN	County N		State Where	Incorporated 73. Ka
Street or Other Mailing Address 6345 Maulison Ave	NE	68507	Contact N	ame	Phone Numb	er
City	State	Zip Code	Email Add	ress		
	Identify Officers, I	Directors, or Part	ners of th	e Nonprofit Organizati	on	
Title	Name, Address, City,		ners or tr	e Nonpront Organizati	OII	
Pastor	Tuan Nauge	n.				
	Immarilate	Hoast of new	y charce	h		
	6345 Madis	on Avil. Lin	tola, Ni	E 68507		
		Description of th				
Motor Vehicle Make	Model Year	Body Typ	е	Vehicle ID Numl	ber	Registration Date or Date of Acquisition, if Newly Purchased
Dodge	GSX 2006	Minivan		2D4GP44L56R6	26070	SONX 14
						2010
Exempt Uses of Motor Vehicle:		L			Are the motor	vehicles used exclusively
Agricultural and Horticultural Society	Educational	Religious	⊠ cı	naritable Cemetery	as indicated?	, amende weed enclasively
Give detailed description of use, including a	n evolunation if multiple	una alanailinatione -ui-		`	YYES	
This vehicle is for Ch		ose classifications exis	ii and alx	Lable No	, <u>M</u> , 123	NO
This vertice is for City	aron use purpos	ie - Religious	and era	KITODO . I YO	If No, give per	centage of exempt use:
personal use						6
Under penalties of law, I d	eclare that I have examin	ed this exemption appl	ication and, to	o the best of my knowledge and	helief it is corre	ct and complete
sign laiso declare that I am duly a	luthorized to sign this exe	emption application.	0	/	201101, 11 10 00110	or and complete.
here Authorized Signature	W		Pas	tor		08-18
TICIC / Admonized Signature			Title		Date	
	F	or County Treasure	er Recomm	endation		
Approval	Com	ments:				
☐ Disapproval						
_ экарргота	-	Signature	Xoru County Trea	Meredith C	huf De	put 9/13/17
	For	County Board of E		DESIGN 85-28		Date
		,	1			·
☐ Approval	Comr	ments:				

Nebraska Department of Revenue 96-253-2006 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011

☐ Disapproval

Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189

Date

Authorized Signature

NEBRASKA Good Life. Great Service.

Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations • To be filed with your county treasurer. • Read instructions on reverse side.

FORM

Name of Organization			Type of O	wnership			
Girl Scouts Spirit of Nebraska				Nonprofit Corporation Other (specify):			
Name of Owner of Property	. , ,		County Na	ame	State Where	e Incorporated	
Girl Scouts Spirit of Nebraska				Lancaster		Nebraska	
Street or Other Mailing Address	,,,		Contact N	ame	Phone Num		
2121 S 44th Street			1	Jodi M. Prewitt		402-779-8232	
City	State	Zip Code	Email Add				
Omaha	NE	68105			@girlscoutsnebra	aska.org	
lo	dentify Officers, D	irectors, or Partn	ers of th				
Title	Name, Address, City, S			o italipiani argi			
Chief Executive Officer		S 44th Street, Oma	aha. NE 6	8105			
	, , , , , , , , , , , , , , , , , , , ,		,				
		· · · · · · · · · · · · · · · · · · ·					
	D	escription of the	Motor V	ehicles			
		tach an additional					
Motor Vehicle Make	ModelVer				ID NI	Registration Date or	
Motor venicle make	Model Year	Body Type		Vehicle	ID Number	Date of Acquisition, if Newly Purchased	
GMC	2010	Savana Var	n	1GJZGPD	G7A1183761	October 2012	
		,	, ,				
			0		7		
Exempt Uses of Motor Vehicle:						r vehicles used exclusively	
Agricultural and Horticultural Society	Educational	Religious	X Ch	aritable	metery as indicated?		
0:-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					M		
Give detailed description of use, including an	explanation if multiple u	se classifications exist:			YES	NO	
This van is used for the transpor	tation of Girl Sco	uts and related r	materials	s to scouting.	If No. airea and		
						ercentage of exempt use:	
						%	
Under penalties of law, I ded	lare that I have examine	d this exemption applica	ation and, to	the best of my knowle	dge and belief, it is corr	ect and complete.	
sign	monzed to sign this exer	прион аррисацон.		0510	-	Marilans	
here Authorized Signature	5 Mins		11-	CFAO	Date	9/04/2018	
TICIC F Admonized Signature		, Ті	ue ,	7.5	Date		
V	Fo	r County Treasurer	Recomm	endation			
		1					
☑ Approval	Comm	ents:					
_							
☐ Disapproval						, , , , , , , , , , , , , , , , , , , ,	
			/	00.	11 - 10 -	1 0/12/14	
		Lano	loc ;	Mereditt 1	Chief Depu	ty 9/13/11	
		Signature of C				Date '	
	For (County Board of Eq	ualization	n Use Only			
☐ Approval	Comm	ents:					
☐ Disapproval	-						
		Authorities 2 Of					
		Authorized Sig	gnature			Date	

Nebraska Department of REVENUE PROPERTY ASSESSMENT	from Motor Vehicle Taxes by Qualifying Nonprofit Organizations •To be filed with your county treasurer.							
Applicant's Name	11/15-1	2 4			Type of Ownership			
Street or Other Mailing Address	Duddiust	Center		County	Nonprofit Corporation			
3175 W Please	ant Thill \$	W		Lancasta	Other (specify):			
City		State Zip C	Code	State Where Incorporated				
HIVCOM		NG 68	523	NE				
Title	Name, Address, City,	ECTORS, OR PARTNERS	OF THE NONPI	ROFIT ORGANIZATION				
President	NHT WAN	TRAN 3/75 W	Dlean	at Hall Rd Kin	1 1 10 DE GEO.			
Tredome	HOANG +	to 23072 W	penton	RA DINCOLA.	NG 68523			
Secentary	To the	LE ISHON 3	1st st	Lincoln, NE	68503			
		SCRIPTION OF THE MOTO						
Motor Vehicle Make	Model Year	Body Type	T	Vehicle ID Number	Registration Date or Date of Acquisition, If Newly Purchased			
Suparu	2011	Forester.	JF2St	TABCOBH 7650US	2			
Toyota	2008	Tuncha	5TFBT	5418870012643	Comais			
Togata	2012	RAVA	27367	4.DVSCW24169S	01701			
V								
Give detailed description of use, including to teach brible and on the hospital on Buddhist people in buy the materials be new building for the	an explanation if multiple lean Bible, at Rame, s toun or ont to remode Lasses tea	children	by mention of the standard and the standard and the standard to the standard t	as indicated? The State Syes or St				
also declare that I am duly a in membership or employme	uthorized to sign this exen	nption application, and that the o	the best of my kno organization owning	owiedge and belief, true, complete g the above-listed property does r	e, and correct. I not discriminate			
here Authorized Signature	12	Title	reasin	Date	2-18			
	FOR C	OUNTY TREASURER REC	OMMENDATIO	N				
☐ APPROVAL	COM	MENTS:						
DISAPPROVAL								
		Signature of County T	Meredi	th	09/13/1y			
	FOR CO	JNTY BOARD OF EQUALIZ	ZATION USE O	NLY				
APPROVAL	COMM	MENTS:						
☐ DISAPPROVAL	annoin agriculation							
		Authorized Signature			Date			

Nebraska Department of Revenue 96-253-2006 Rev. 8-2011 Supersedes 96-253-2006 Rev. 5-2009



NEBRASKA |

Application for Exemption

FORM

Good Life. Great Service.	fr	om Motor Vehicle	• Taxes by Qual	lifying No	nprofit Organizati	ons	457
DEPARTMENT OF REVENUE			 To be filed with y Read instruction 			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	701
Name of Organization	briation Ch.	.wab		Type of Owne		, , , ,	
House of Prayer Cl	ninstian Cht	II C				er (specify):	
House of Prayer Cl	hrietian Chu	ıroh		County Name	Lancaster	State Where In	corporated Nebraska
Street or Other Mailing Addr				Contact Nam			
1333 Morton St	000				eg Stepanyuk	Phone Number	02-610-2618
City		State	Zip Code	Email Addres			2010 2010
Lincoln		NE	68521		olegstepanyu	k.hop@gmai	l.com
	ı	dentify Officers, Di	rectors, or Partn	ers of the I	Nonprofit Organizati		3,
Title		Name, Address, City, St					
Senior Pastor		Bogdan Stepanyuk,		Ave., Lincol	n, NE 68524		
Treasurer		Viktor Popov, 13830					
Secretary		Vasiliy Brichka, 3000	W. Pleasant Hill R	d., Lincoln, N	E 68523		
			escription of the				
Motor Vehicle M	lake	Model Year	Body Type		Vehicle ID Num	ber	Registration Date or Date of Acquisition, if Newly Purchased
Mercedes Benz		2013	Van		WDZPE8CC7D58	08875	October 2017
Ford Transit 350		2016	Van		1FBZX2CM4GKA	32024	March 2018
xempt Uses of Motor Vehicle					***		
Give detailed description of un These vans are used Transport missionary Traious conferences	l to transporteams to th	rt elderly members e areas of their se	s of our church tervice, youth gro	to church soups and o	ervices, rchestra to	If No, give percer	□ NO
sign laiso de gare t	inat I am duly au	thorized to sign this exemp	this exemption applica ption application.		best of my knowledge and		
here Authorized 61	grany onature	Jepa ny W	Titl		enior Pastor	09/1	4/2018
	0	For			1-41	Date	
		FOI	County Treasurer	Hecommend	ation		
Approval		Comme	ents:				
☐ Disapproval							
_ Disapproval			1				1
			Signature of C	ounty Treasure	Perealith Ch	uf Depu	ty hearing 9/
		For Co	ounty Board of Equ	ualization Us	se Only		
☐ Approval		Comme	nts:				
☐ Disapproval							
							
			N				
			Authorized Sign	nature			Date

Nebraska Department of Revenue 96-253-2006 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011



					Pri	nt Reset
Nebraska Department of REVENUE PROPERTY ASSESSMENT		ication for Exe Taxes by Qualifying N • To be filed with your county • Read instructions on revers	lonprofit O treasurer.		ns	FORM 457
Applicant's Name Good Neighbor Community C	Contor		3,44			Type of Ownership
Street or Other Mailing Address 2617 Y Street				County I an	caster	Nonprofit Corporation
City Lincoln		State Zip Code NE 68503	1	State Where Ir		Other (specify):
	TIFY OFFICERS, DIRE	CTORS, OR PARTNERS OF	THE NONPRO	DFIT ORGAN	IZATION	
Title	Name, Address, City,	State, Zip Code				
Executive Director	Tom Randa, 3622	South 52nd Street, Lincoln, NE	68506			
Board President	Kolade Alabi, 430 7	errace Road Lincoln, NE 6850)5			
Treasurer	Jerry Wiggle, P.O.E	Box 66, Bennett, NE				
Board Secretary	Carol Leonhardt, 69	530 South 66th Street, Lincoln,	NE 68516			
		SCRIPTION OF THE MOTOR \				
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Number			Registration Date or Date of Acquisition, if Newly Purchased
IHC - 4100	2007	Conventional Cab with	3HTMWAFK07N430551		October	
		14' van equipment				
		,				
Exempt Uses of Motor Vehicle: Agricultural/Horticultural	Educational	Religious X Charitable	☐ Cer	metery	Are the motor as indicated?	vehicles used exclusively
Give detailed description of use, including	an explanation if multiple (use classifications exist:			YES	NO
The truck will be used for Goo	d Neighbor Comm	unity Center's Food Distr	ribution Pro	gram.		centage of exempt use:
					%	0
Picking up food donations fron	i various sites in to	own.				
Picking up miscellaneous dona	ations to be distrib	uted to low income famili	es at the c	enter.		
Under penalties of law, I dec also declare that I am duly a in membership or employme	uthorized to sign this exen	this application and that it is, to the aption application, and that the orgar rational origin.	best of my kno nization owning	wledge and beli the above-liste	ief, true, complet d property does	e, and correct. I not discriminate
sign		E	Executive D	irector	O!	9/13/18
here Authorized Signature		Title			Date	
	FOR C	OUNTY TREASURER RECO	MMENDATIO	V		
APPROVAL	COMM	MENTS:				z 20 3 40 40 40 40 40 40 40 40 40 40 40 40 40
DISAPPROVAL			-			

FOR COUNTY BOARD OF EQUALIZATION USE ONLY

APPROVAL

COMMENTS:

DISAPPROVAL

Signature of County Treasurer

Authorized Signature

Nebraska Department of Revenue 96-253-2006 Rev. 8-2011 Supersedes 96-253-2006 Rev. 5-2009 Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189

Date

PLEASE RETAIN A COPY FOR YOUR RECORDS.



Good Life, Great Service.

Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

FORM 157

DEPARTMENT OF REVENUE		Read Instruction	s on revers	e side.		457
Name of Organization			Type of Ov			
Calvary Community Church			⊠ Nor	profit Corporation Other	(specify):	
Name of Owner of Property		~~~~	County Na	ame	State Where	ncorporated
Calvary Community Church				Lancaster		NE
Street or Other Mailing Address			Contact Na	ame	Phone Numb	er
4400 N 1st St.			}	Jeff Ryan	4	102.474.0642
City Lincoln	State NE	Zìp Code 68521	Email Add	ress		
lo	lentify Officers. DI	rectors, or Partn	ers of th	e Nonprofit Organizatio	n	
Title	Name, Address, City, St			- tronference - Samuel		1 1/1
President	Richard Danielson, 1		Dr. Lincoln	n. NE 68521		
Secretary	Nate Howland, 1126					71
Treasurer	Todd Case, 1576 Pr					
-						
,,						
		escription of the				
Motor Vehicle Make	Model Year	Body Type		Vehicle ID Numb	er	Registration Date or Date of Acquisition,
Ford Pickup	1997	F-150		1FTDX1867VKB08	2008	If Newly Purchased
1 Old 1 longp	1331	1-130		IFIDA 1007 VABUO	0000	10/17
	-					
Exempt Uses of Motor Vehicle:				<u> </u>	Are the motor	vehicles used exclusively
Primary purpose is for snow rem to transport items to locations wi maintenance, etc.)	oval and moving thin the city. (i.e.	items around or debris to dump	ur propei , equipm	rty. Occasional use nent for	If No, give perc	centage of exempt use:
I also dealars that I am did'y aut	clare that I have examined thorized to algorithis exen	d this exemption application.	ation and, to	the best of my knowledge and b	elief, it is correc	ot and complete.
sign	111	•	E	Executive Director	9	9-13-18
here Authorized Signature		т	itle		Date	
	For	r County Treasurer	Recomm	endation		
Approval	Comm	ents:				
☐ Disapproval	-					
		Signature of	Oc M County Trea	eredits, Chief	Deputy J	1000 9/19/10 Date
	For C	County Board of E	qualization	n Use Only		
☐ Approval	Comm	ents:				
☐ Dicamproval						
Disapproval	-		-			
		Authorized S	lanature			Date
		- Marionzeu o	Suarole			Dale



JEBRASKA DOD Life Great Service	Appl from Motor Vehicle	ication for Taxes by Quali	r Exemption ifying Nonprofit Organiza sur county treasurer.	tions	FORM	
Bitherpatables the polykerid		 To be filed with yo Read instructions 	our county treasurer.		457	
ame of Organization	ere entrement de de hande de sementem e a meny elémente trommer que en cambrida en tradition de la companya de		Type of Ownership		,	
My Bridge Radio				other (specify)	Transfer and the second	
ame of Owner of Property My Bridge Radio			County Name Lancaster	State Where	Incorporated NE	
reet or Other Mailing Address 723 Lancashire Ct			Contact Name Carolyn Simmons Phone Number 402-770-4616			
ty Lincoln	State NE	5p Code 68510-5216		nybridgeradic	o.net	
			ers of the Nonprofit Organiz	ation		
resident	Name, Address, City, S Stanley Parker, 723		oln NE 68510			
easurer	Rachel Parker, 723					
ecretary	Carolyn Simmons, 9					
		escription of the				
		tach an additional s			Registration Date or	
Motor Vehicle Make	Model Year	Body Type	Vehicle ID N	umber	Date of Acquisition, if Newly Purchased	
ord	2012	F15	1FTEX1EM4CI	FC57568	August 30, 2017	
empt Uses of Motor Vehicle:				Are the motor	r vehicles used exclusively	
	eer to travel to our radio s		pert. Vehicle is used by the enance and repair of radio		rcentage of exempt use: %	
	es of law, I declare that I have examine , I am duly authprized to sign this exe		ation and, to the best of my knowledge	and belief, it is corre	ect and complete.	
sign / m	ma Kom	way	secretarų	9	9-14-2018	
1ere Authorized Sign	ure	Ti	itle	Date		
	Fo	or County Treasurer	Recommendation			
Approval	Comm	nents:				
Disapproval						
	***************************************	Caral	Maril A Ala	In. 1	1 0/10	
*		Signature of	County Treasurer	Deputy	Neonu 9/19	
	For	County Board of E	qualization Use Only			
Approval	Comn	nents:				
☐ Disapproval	-					
—		1				
		Authorized S	ignature		Date	
		10 part = 1 = 5 = 5	V - 0 × 200 € 2		100 C C C C C C C C C C C C C C C C C C	

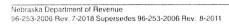
Nobraska Duparlment of Revenue 96-253-2006 Rey. 7-2018 Supersedes 96-253-2006 Rev. 8-2011

NEBRASKA	
Condition Great Service	

Application for Exemption from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

FORM

DEPARTMENT OF REVENUE		To be filed with you Read instructions	our county treasurer.	J	457
lame of Organization	А.	- neau matructions	Type of Ownership		
Onnecha Pointe Church	not the Mazan	ene	Nonprofit Corporatio		
ame of Owner of Property			County Name	State Where	Incorporated
1901 S 70th St			Contact Name	Phone Numb	
treet or Other Mailing Address	NI	68500	Dreia Eddie		861930
LIN COIN	State	Zip Code	Email Address	1.100	301130
··· ·		,	deddie@con	inecting-point	e.com
	Identify Officers, D	Directors, or Partne	ers of the Nonprofit	Organization '	
itle	Name, Address, City, S			,	
Pastor		174 6950 JOL	oth Sthincoln 1	6 68506 ON ME 108516	
Vinector	Avlehe Win	et 5512 Ch	and De Mine	DANE USSICE	
		Description of the ttach an additional s			
Motor Vehicle Make	Model Year	Body Type	Ve	hicle ID Number	Registration Date or Date of Acquisition, if Newly Purchased
Ford	2007	Van -15 po	issure 1FB55	31LX7 DA03580	10 117 - 10-18
			1		
xempt Uses of Motor Vehicle:	rt-q.	4-3		as indicated?	vehicles used exclusively
Agricultural and Horticultural Soci	ety (<u>\(\)</u> Educational	Religious	Charitable	_ Cemetery as indicated:	
Transporting child field trips Son	lnen to + from ne childcane	school + errands			rcentage of exempt use: %
Under penalties of law	, I declare that I have examin	ed this exemption applica	ation and, to the best of my k	nowledge and belief, it is corre	ect and complete.
sign lalso-declare that lamidu	uly authorized to sign this exe	emption application.	. ~		
		T	Asst. Directo	<u>9-1</u>	8-18
nere Authorized Signature				Date	
	Fe	or County Treasurer	Hecommendation		
Approval	Comr	ments:			
Disapproval					
		1. 1	na. 1.1 al	1.10 1.1	01.1
		Landoc	1 Ural G	Lif Deputy Trea	xm 9/19/18
	For	-3	qualization Use Only	/	Date *
	101	During Dourd of Le	Tankation Job Only		
Approval	Comr	ments:			
	_ 2				
Disapproval	-				Automotive de la constitución de
		Authorized Si	gnature		Date





NEBRASKA I	Ann	lication fo	e Eve	amption		
	اعلام iom Motor Vehici mc	e Taxes by Qua	lifvina N	SHIPHOH Johnsoft Organizati	anc.	FORM
DEPARTMENT OF REVENUE		To be filed with y Read instruction	our county	lonprofit Organizati	JIIS	457
Name of Organization		· Head manuchon	Type of O	Charles on the same of the sam		101
Immanuel			⊠ No	nprofit Corporation Othe	er (specify)	
Name of Owner of Property		Tuber and the second se	County No	ame	State Where In	corporated
Immanuel Retirement Commu	nities	The second secon		Lancaster		Nebraska
Street or Other Mailing Address 1044 N. 115th Street, Suite 50	0		Contact N	ame Scott Bear	Phone Number (40	02) 829-2900
City	State	Zip Code	Email Add			
Omaha	NE	68154			mmanuel.cor	n
		The same of the sa	ers of th	e Nonprofit Organizat	lon	
Title President	Name, Address. City. 5				***************************************	
Secretary		4 N. 115th Street, S			·	***************************************
Chair	David A. Jacox - 10	44 N. 115th Street, S	Suite 500	Omaha NE 68154		
Vice Chair		14 N. 115th Street, S				
		1411.1101101101101		Official NE 00134	***	
	Γ	escription of the	Motor V	ahirlac	7	
	-At	tach an additional :	sheet, if n	ecessary.		
Motor Vehicle Make	Model Year	Body Type		Vahicle ID Num	ber	Registration Date or Date of Acquisition, If Newly Purchased
Honda	2013	Odyssey Va	-	5FNRL5H41DB00	9381	October 2018
Ford Buick	2014	El Dorado Bo		1FDFE4FS9DDB:		October 2018
BOICK	2001	Century Cust	om	2G4WS52J01129	1057	October 2018
			-			
Exempt Uses of Motor Vehicle:					Ara tha motor ve	hicles used exclusively
Agricultural and Horticultural Society	Educational	Religious	⊠ Ch	aritable Cemetery	as Indicated?	ancies usea exclusively
Give detailed description of use, including an	explanation if multiple u	se classifications exist:			YES	UNO
Immanuel sponsors healthcare a	and senior service	es in Omaha, Lir	icoln, an	id surrounding		
areas. Immanuel provides facilit	ies and program	s designed to pro	omote h	ealthy aging of the	If No, give perce	ntage of exempt use:
mind, body, and spirit. Vehicles	are used exclusiv	ely for transport	ing resid	lents to	%	
appointments and activities.						
		The state of the s				
	clare that I have examine thorized to sign this exe	ed this exemption application.	ation and, to	the best of my knowledge and	belief, it is correct	and complete
sign also declare that am duly au	/	mpriori opprioritori.		CFO	a.	F: F:
here Authorized Signature	The state of the s			CFO		8-18
1 4 9 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second secon	Ti	tle		Date	
11010	Fo			endation	Date	
11010	Fo	r County Treasurer		endation	Date	

Nebraska Department of Revenue 96-253-2006 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011

Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189

Please retain a copy for your records.



NEBRASKA I

Application for Exemption

FORM

Good Life Great Service.	fro	m Motor Vehicle	e Taxes by Qual	lifying N	lonprofit Organization treasurer, e side.	ons	457
DEPARTMENT OF REVENUE			• Read Instruction	s on revers	e side.		457
Name of Organization				Type of Ov			
Immanuel Name of Owner of Propert			-			r (specify)	
Immanuel Retiren	•	vitice II		County Na	- 100	State Where In	
Street or Other Mailing Add		illes II	V Landau Control Contr	Contact Na	Lancaster	- N M M.	Nebraska
1044 N. 115th Str	eet, Suite 50	0		Contactive	Scott Bear	Phone Numbe	02) 829-2900
City		State	Zip Code	Email Add		1,,	02/020-2000
Omaha		NE	68154			nmanuel.co	m
	lo	lentify Officers, D	irectors, or Partn	ers of the	e Nonprofit Organizati	on	and the property of the state o
Title		Name, Address, City, S			***************************************		
President		Eric N. Gurley - 104	4 N. 115th Street, S	uite 500 O	maha NE 68154		The second secon
Secretary	70 12 2000	George A. Grieb - 1	044 N. 115th Street,	Suite 500	Omaha NE 68154		The same of the sa
Chair			44 N. 115th Street, 5				ALTERNATION TO A REPORT OF THE PROPERTY OF THE
Vice Chair		Bruce A. Plath - 104	14 N. 115th Street, S	uite 500	Omaha NE 68154		Name of the Party
			, , , , , , , , , , , , , , , , , , ,	- Long-to-			White the same of
			escription of the			7,	
Motor Vehicle	Make	Model Year	Body Type		Vehicle ID Num	per	Registration Date or Date of Acquisition, if Newly Purchased
Honda		2018	Odyssey EX	(L	5FNRL6H73JB04	4211	October 2018
Ford		2018	E350 El Dorado A	erotech	1FDEE3FS5JDC2	9734	October 2018
the same and the s							
				*			
Exempt Uses of Motor Vehic	ala:				the same of the sa	,,	ehicles used exclusively
Agricultural and Hor Give detailed description o Immanuel sponsors	f use, including an s healthcare a	nd senior service	es in Omaha, Lir	ncoln, an	aritable Cemetery	as Indicated?	Пио
areas. Immanuel p mind, body, and spi appointments and a	irit. Vehicles a	ies and program: are used exclusiv	s designed to pr ely for transport	omote he	ealthy aging of the lents to	If No, give perc	entage of exempt use:
sign lalso dactor here Authorized	that I am duly au	clare that I have examine thorized to sign this exe	mption application.	ation and, to	the best of my knowledge and		t and complete.
		Fo	or County Treasurer	Recomm	endation		The second secon
Approval		Comm	nents:				
☐ Disapproval							
			Signature of	doc County Treas	Merediks (hif Dep	4 9/26/1V
		For	County Board of Ed	qualization	n Use Only		Mou
Approval		Comm	nents:			**************************************	
Disapproval		Notice of the second	77 C			9	
1							
			Authorized S	gnature			Date

Nebraska Department of Revenue 96-253-2006 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011

Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189

Please retain a copy for your records.

