Nebraska Departir	UE
Applicant's Name	

City

Lincoln

Madonna Rehabilitation Hospital Street or Other Mailing Address 5401 South Street

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

Zip Code

68506

rganizations	457
	Type of Ownership
County	Nonprofil Corporation
Lancaster	Other (specify):
State Where Incorporated	
NĘ	
FIT ORGANIZATION	

I

FORM

d providence and a second s	
IDENTI	FY OFFICERS, DIRECTORS, OR PARTNERS OF THE NONPROFIT ORGANIZATION
•	Name, Address, Ciliy, State, Zip Code
President and CEO	Paul Dongill, 5401 South Street, Lincoln, NE 68506
Chief Financial Officer	Victor Wilkowicz, 5401 South Street, Lincoln, NE 68506

State

NE

Motor Vehicle Make	Model Year	Body Type	Vehicle ID Num	ber	Registration Date o Date of Acquisition if Newly Purchased
ord	2018	Bus	1FDFE4FS5JDC	06402	10/29/18
	· · · · · · · · · · · · · · · · · · ·	######################################			
mot Uses of Motor Vehicle:				Are the motor	vehicles used exclusively
Agricultural/Horticultural	Educational 🔲 F	aligious 🛛 🔀 Charitable	Cemelery	as Indicated?	formana aniao anianontany
live detailed description of use, including a	an explanation if multiple us	e classifications exist:		YES	
icensed by the State of Nebra ehabilitation, Long Term Care community medical transportat	and Nursing Home ion. These service	e services. Madonna al	so provides	lf No, give per	centage of exempt use: %
s described in 501(C)(3) of th	e IRS Code.				
also declare that I am duly au	Ithorized to sign this exemp	is application and that it is, to the tion application, and that the orga	e best of my knowledge and be anization owning the above-liste	ief, true, comple d property does	te, and correct. I not discriminate
also declare that I am duly au in:membership or employmen sign	Ithorized to sign this exemp	lion application, and that the organational origin.	e best of my knowledge and be anization owning the above-liste General Counsel	d property does	te, and correct. 1 not discriminate. 11/6/18
also declare that I am duly au in membership or employmen	intorized to sign this exemp int based on race, color, or i	tion application, and that the organational origin.	general Counsel	d property does	not'discriminate.
also declare that I am duly au	intorized to sign this exemp int based on race, color, or i	Title	general Counsel	d property does	not'discriminate.
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DEBRASKA Good Life. Great Service.	App om Motor Vehicl	 To be filed with 		ofit Organizatio	ns	form 457
Name of Organization LINCULN KATZ	Youth G.	roup	Type of Ownership		(specify):	ung l
Jame of Owner of Property 912 G	1 1 1	lane	County Name	aster	State Where In	corporated
treet or Other Malling Address ムトハヒント	Ne	68521	Contact Name	Breeteke	Phone Numbe	429 6725
ity	State	Zip Code	Email Address	etzke o c	harter	. Com
I(dentify Officers, D	irectors, or Part				
Dent la la	Name, Address, City, S			- P	1	
President. Secretary	Pat Hup		Hunterridge	enc 6952		
Treasure			720 Pros			
		escription of the tach an additional				
Motor Vehicle Make	Model Year	Body Type		vehicle ID Numbe	er	Registration Date or Date of Acquisition,
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Nissan	2015	Path fin	Jer SNI	ARZMINX FC	646734	8/15/2017
Purpose 1 to Pick you Inansportation Iontinues with children. We b Underpenallies of law, I dec I also declare that I am duly au Authorized Signature	to be a fro n=1p by solo	d this exemption application.	lany house ! 1550 e .	کی اطع of my knowledge and b	elief, it is correct	entage of exempt use: and complete. 95 / 2wi f
	Fo	r County Treasure	r Recommendatio	'n		
Approval	Comm	ents:				
] Disapproval		Signature of	County Treasurer	J. J.	they	Date
	For	County Board of E	qualization Use C	nly	\bigcirc	
] Approval	Comm	ents:				
Disapproval						
		Authorized S	ignature			Date
vraska Department of Revenue						

Please retain a copy for your records.

BRASKA I life Great Service		lication for Exe Ile Taxes by Qualifying N	Ionprofit Organization	ns	FORM
DEPARTMENT OF REVENUE		 To be filed with your county Read instructions on revers 	treasurer,		457
ne of Organization ZBRASKH LWTHE		Type of Q		(specify):	
ERISEN LUTHE	12 Por CAMP	US MWI. CORD TNOT		State Where In	corporated
+20 RANdob	h STREET	LAM	CASYER	NEB	RASKA
eet or Other Mailing Address		Conlact N		Phone Numbe	
	and a second of the second of	8510 KU68	R SASSE	402-	432-259
	State	Zip Code Email Add	asse nEl		Com
	Identify Officers,	Directors, or Partners of th			Com
- Y	Name, Address, City,		, , ,		1
LESICENT	Jordan	RASIMUSSEN, -	2377 CD, Rd	12 - FR	EMANT, 680
ELRETARY	ROGER	L. SASSE - 43	25 N. 14 St	· - Gen	cohn 68:
X DIRECTOR	Chida	Mionxag - 30	31 SO 74 St	· - Cur	- the 6850
N DIRECTOR	JON F	REGVICES - 12	SES ONID C	ivele	-CLARANA 6
		Description of the Motor V			
		Attach an additional sheet, if n			Registration Date or
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Numbe	er	Date of Acquisition, if Newly Purchased
EVrolzt	2018	CRUZE SEdan	IGIBE 55M	25721	3220 2018/
Agricultural and Horticultural Socie	an explanation if multiple	use classifications exist	naritable 🗌 Cemetery	as indicated?	ehicles used exclusively
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Please retain a copy for your records.

TIL

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11/08/2018 12:56 #900 P.002/002

Title Name, President Bishop Vice President Msgr. Secretary Alan S Treasurer Brand Motor Vehicle Make Mc Honda	Address, City, S o James D. Cc Mark Huber, 3 Slattery, 1128 L on Kauffman, 4 • Atta del Year 2012 Educational on if multiple use	itate, Zip Code onley, 3400 Sheridar 3400 Sheridan Aven Lincoln Mall suite 30 555 South 10th Stre escription of the ach an additional s Body Type Accord US E, Religious e classifications exist:	Type of O No. County Na Contact N Email Add errs of th n Avenue, lue, Lincoln 00, Lincoln	ame Lancaster Jame Pat Walbrecht Itess pwal Lincoln, NE 68508 Lincoln, NE 68508	Phone Num brecht@cssisus nization D Number DCA019415	402-474-1600
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Authorized Signature Authorized Signature	have examined	this exemption applicat	tion and, to t	the best of my knowledg	e and belief, it is correc	and complete.
] Disapproval		0	fec O	losistan	t Date	08,2018
] Disapproval	For (County Treasurer R	Recommen	ndation		
] Disapproval						
	Comme	nts:				
			hdy	Ship	·	11-14-
	For Co	Signature of Con ounty Board of Equ	-		/	Date
1	Commer	nts:			-	
] Disapproval						
		Authorized Signa	ature			
iska Department of Revenue 3-2006 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011		· / Millionzed Olgin				Date
				Authorized by Neb. F	lev. Slal. §§ 77-202(1)(c) ar	Date nd (d), and 60-3,185, and 60-3,1

EBKASKA fre	APPI om Motor Vehicle	ication fo	D r EX E	emption	nizations	FORM
Od Life. Great Service.	om Motor Vehicle	• To be filed with y	your county	treasurer.	Lationo	457
ame of Organization		• Read Instruction	Type of Ov			
Christian Heritage Children's F	lomes			nprofit Corporation	Other (specify):	
ame of Owner of Property			County Na	ame	State When	e Incorporated
Christian Heritage Children's F	lomes			Lancaster		Nebraska
reet or Other Malling Address			Contact N	ame	Phone Nun	nber
14880 Old Cheney Road				Vicki Davis		421-5437, Ext. 406
^{ty} Walton	State NE	Zip Code 68461	Email Add		ki.Davis@chne.	org
ļ	dentify Officers, Di	irectors, or Partr	ners of th	e Nonprofit Orga	anization	-
lle	Name, Address, City, S			Q_		A 1914
resident	Brad Brown, 14880	Old Cheney Road,	Walton, NE	E 68461		
ce President	Brian Rader, 14880	Old Cheney Road,	NE 68461			
ecretary/Treasurer	Julie Spader, 14880) Old Cheney Road,	, Walton, N	IE 68461		
		escription of the tach an additional				Ay
Motor Vehicle Make	Model Year	Body Type		-	ID Number	Registration Date o Date of Acquisition
ee Attached Sheet for Information						if Newly Purchased
- A with the						
empt Uses of Motor Vehicle:						r vehicles used exclusively
			:		netery as indicated'	Пио
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Toyota	2007	Sienna CE/LE	5TDZK23C77S062229
Honda	2008	Accord Sedan EX	1HGCP36718AO29903
Toyota		Avalon XL/XLX/Limit 4 door sedan	4T1BK36BB9U337708
Honda	2014	4 door utility	2HKRM4H30EH621671
Honda	2014	Civic Sedan	19XFB2F59EE031278
Honda		Accord Sedan	1HGCR2F3XFA125124
Honda	2017	Accord Sedan	1HGCR2F39HA114599
Honda	2017	Accord LX (CVT) 4 door sedan	1HGCR2F31HA281877

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VEBRASKA ood Life. Great Service.	App from Motor Vehic	Dlication for Ex Cle Taxes by Qualifying • To be filed with your coun	Nonprofit Organizati	ons	^{FORM}
Name of Organization Tabrtha, INC	,	Read instructions on reve Type of	rse side. Ownership	er (specify):	437
Name of Owner of Property Abitha Street or Other Mailing Address		County I LA Contact	NCASTER	State Where In Phome Number	
4120 RANDOLPH	JT.	ST	EVE WATSON	(402)	486-8542
LINCOLN	NE Identify Officers.	Length Code Email Active Strength Code Strength Code Strength Stre	teven, ulatson (<u>Otabitha</u>	org
ILE CFO PRESIDENT	Name, Address, City Darche, By Christie		111011	N, NE 62 ncolla; N	8510 VE 68510
		Description of the Motor V Attach an additional sheet, if			
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Num	ber	Registration Date or Date of Acquisition, if Newly Purchased
GOSHEN GOSHEN	2018	BUS NON SCHOOL BUS NON SCHOOL	IFDFE4FS9JI IFDFE4FS7JJ	DC 06404 DC 06403	10/3/2018
empt Uses of Motor Vehicle: Agricultural and Horticultural Soc ve detailed description of use, includi YONSPORATION FOR	no an evolution if multiple		charitable Cernetery	as indicated?	hicles used exclusively
Under pendires of law I also declareduct. I am d I also declareduct. I am d Authorized Signature	ly authorized to sign this ex	eed this exemption application and, emption application. Title or County Treasurer Recomm	n c E Supply Unam		and complete.
] Approval	Com	ments:			
] Disapproval		Signature of County Tree	Shithy		<u>11-14-</u> Date
	For	County Board of Equalization	on Use Only		
] Approval	Comr	ments:			
] Disapproval					
		Authorized Signature			Date
raska Department of Revenue 253-2006 Rev. 7-2018 Supersedes 96-253-2		se retain a copy for you		al. §§ 77-202(1)(c) an	d (d). and 60-3,185, and 60-3,

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

lead	Instruct	lons on	reverse	side.

FORM
457
Type of Ownership

The American Legion, Departn	nent of Nebraska			X Nonprofit
Street or Other Mailing Address			County	Corporation
P.O. Box 5205, 5600 P Street			55	Other (specify):
City	State	Zip Code	State Where Incorporated] —
Lincoln	NE	68505-0205	Nebraska	
IDENTI	TY OFFICERS, DIRECTORS, C	R PARTNERS OF THE NON	PROFIT ORGANIZATION	
Title	Name, Address, City, State, Zip Co	de		
Department Adjutant	David W. Salak, P.O. Box 520	5, Lincoln, NE 68505		
Department Assistant Adjutant	Brent Hagel-Pitt, P.O. Box 520	05, Lincoln, NE 68505		

т		CRIPTION OF THE MOTOR VI ach an additional sheet, if ne			Deviation Data an
Motor Vehicle Make	Model Year	Body Type	Vehicle ID Nu	mber	Registration Date of Date of Acquisition, if Newly Purchased
Chrysler, Pacifica Touring	2017	Mini Van	2C4RC1DG2HR	515028	07/17/2017
Dodge, Caravan SXT	2014	Sport Van	2C4RDGCG8ER	453020	07/17/2017
xempt Uses of Motor Vehicle: Agricultural/Horticultural Ed Bive detailed description of use, including an e Jsed for official travel by Departm	axplanation if multiple us		Cemetery	as indicated?	vehicles used exclusively
also declare that I am duly autho	prized to sign this exempt	is application and that it is, to the b tion application, and that the organi national origin.			
also declare that I am duly author in membership or employment b	prized to sign this exempt pased on race, color, or n	tion application, and that the organi national origin. As Title	zation owning the above-lis	ted property does	
also dectare that I am duly autho in membership or employment b	prized to sign this exempt pased on race, color, or n	tion application, and that the organi national origin.	zation owning the above-lis	ted property does	not discriminate
also declare that I am duly autho	prized to sign this exempt pased on race, color, or n	tion application, and that the organi national origin. As Title	zation owning the above-lis	ted property does	not discriminate
also declare that I am duly autho in membership or employment b sign Authorized Signature	prized to sign this exempt pased on race, color, or n	tion application, and that the organi national origin. As Title	zation owning the above-lis	ted property does	not discriminate
also declare that I am duly autho in membership or employment b sign Authorized Signature	prized to sign this exempt pased on race, color, or n FOR-CO COMME	tion application, and that the organi national origin. As Title UNTY TREASURER RECOMM ENTS:	zation owning the above-lis	ted property does	14/2018 10/31/1
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also declare that I am duly autho in membership or employment b Sign Authorized Signature	FOR COUN	tion application, and that the organi national origin. As Title UNTY TREASURER RECOMI ENTS:	zation owning the above-lis	06/	14/2018 /14/2018

NEBRASKA Good Life, Great Service, fro		lication fo		onprofit Organizati treasurer.	ons	FORM 457
Name of Organization	T	• Read instruction	s on reverse Type of Ow	pership		437
Name of Owner of Property	-Inc		County Na		er (specify):	corporated
Street or Other Mailing Andress	ME	(08503	Gontact Na	m^{me} M_{c} M_{c} M_{c}	Phone Number	475-8717
City	State	Zip Code	Email Addr	ess, danaldaice	nterpriv	nte.oca
Title	dentify Officers, D Name, Address, City, S		ers of the	Nonprofit Organizat	ion	
Topher Hansen, Tamp Lawis Monardt Pat Meyer	CEO COO CEO	2633 P 2633 Y 2633 Y	St. 2 St St	Uncella I Uncella I Uncella	E 6850 VE 6851 VE 685	3 13 203
		escription of the tach an additional s				
Motor Vehicle Make	Model Year	Body Type		Vehicle ID Num	ıber	Registration Date or Date of Acquisition, if Newly Purchased
Chevrolet	2005	Cargo Vi	an	VGCEGIS	X431190	999 * 9/30/18
Exempt Uses of Motor Vehicle:	Educational	Religious		uritable Cemetery	Are the motor ve as indicated?	hicles used exclusively
			\sim		VES	NO
Transportation of use, including an Transportation to program					~%	ntage of exempt use:
Under penalties of law, I dec I also decare that I am duly ar here Authorized Signature	clare that I have examine thorized to sign this exe	mptice application.	ation and, to RECEN	he best of my knowledge and fall wine S		and complete. -30 ~ 18
	Fo	r Count <mark>y Treasu</mark> rer	Recomme	ndation		
Approval	Comm	ents:				
🗌 Disapproval		Signature of			2	18/31/18 Date
	For	County Board of Ec	Jualization	Use Only		. /
Approval	Comm	ents:				~.
Disapproval						
		Authorized Sig	gnature			Date
Nebraska Department of Revenue 96-253-2006 Rev. 7-2018 Supersedes 96-253-2006 Re	ev. 8-2011			Authorized by Neb. Rev. S	tat. §§ 77-202(1)(c) ar	id (d), and 60-3,185, and 60-3,189

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Please retain a copy for your records.

Name of Organization Type of Organization Saint Paul United Methodist Church Image of Organization Other (specify):	Sood Life. Great Service.	App om Motor Vehicl	lication fo	lifying No	nprofit Organizati	ons	FORM
Saint Paul United Methodist Church Image of Owner de Property Sume and Owner de Property Saint Paul United Methodist Church Courty Name Sume and Owner de Property Sint Paul United Methodist Church Courty Name Sume Area Sint Paul United Methodist Church Courty Name Plone Number Sint Paul United Methodist Church Courty Name Plone Number Sint Paul United Methodist Church Sume Area Plone Number Sint Paul United Methodist Church Nume, Address, City, Statu, Jp. Cole Sume Area City State Z ploceh Sume Area Sume Area Incoln NE Sole Mathodist, Jp. Cole Sume Area Mater Vehicle Make Nume, Address, City, Statu, Jp. Cole Sume Area Sume Area Description of the Motor Vehicles	DEPARTMENT OF REVENUE		 Read instruction 	our county tr	easurer. side.		457
Internet of Worker of Property County Name State Withman Recorportated Saint Paul United Methodist Church Lancaster Netbraska State County Name Context Name Prone Number of 202,477,695 State County Name State County Name State Vite Nonprofit Organization T144 M Street NE 2p Code Email Modess Lincoln NE 65508 Swaldman@saintpaulumc.org Identify Officers, Directors, or Partners of the Nonprofit Organization Modess 7000000000000000000000000000000000000							
Saint Paul United Methodist Church Contact Name Description Index rolline Mailing Address Contact Name Phone Namber 1144 M Stret Contact Name Contact Name Phone Namber 1144 M Stret Contact Name Contact Name 402.477.695 With the Name Name State Zip Code Email Address State 20.2477.695 Incoln NE 68508 sweld/man@saintpaulumc.org 102.477.695 Incoln NE 68508 sweld/man@saintpaulumc.org Incoln Steve Net/Kolwy, 9221 Sim CL, Lincoln, NE 68526 setter setter Incoln NE Body Type Vehicle ID Number Pagintriko Incoln Moder Vehicle Body Type Vehicle ID Number Pagintriko Incoln Religion Contact Name Contact Name Pagintriko		hurch		🔀 Nonpr	ofit Corporation	er (specify):	
				County Name	e	State Where I	ncorporated
1144 M Street Sherry Waldman 402.477.695 By State Zp Code swaldman@saintpaulumc.org Incoln NE 68508 swaldman@saintpaulumc.org Identify Officers, Directors, or Partners of the Nonprofit Organization itemat.address itemat.address Incoln NE 68508 swaldman@saintpaulumc.org Identify Officers, Directors, or Partners of the Nonprofit Organization itemat.address itemat.address Incoln Steve McKelvey, 9221 Sint CL, Lincoln, NE 68526 itemat.address itemat.address Ice President Steve Boven, 8394 Lammic Circle, Lincoln, NE 68526 itemat.address itemat.address Ice President Dave Wilcex, 5930 Culwells Road, Lincoln, NE 68526 itemat.address itemat.address Ice President Dave Wilcex, 6930 Culwells Road, Lincoln, NE 68526 itemat.address itemat.address Ice President Modor Vehicle Make Model Year Body Type Vehicle ID Number Registration Incole Number Modor Vehicle Make Model Year Body Type Vehicle ID Number Registration Incole Year 2013 RWD 2500 135'' IGAWGRFA2D 1122233 UC Z	Saint Paul United Methodist C	hurch			Lancaster		Nebraska
Bite Zip Code Email Address Swaldman@saintpaulumc.org Lincoln NE 66508 swaldman@saintpaulumc.org Identify Officers, Directors, or Partners of the Nonprofit Organization Identify Officers, Directors, or Partners of the Nonprofit Organization Ite Name, Address, Oly, Stue, Zip Stock Steve McKevey, 9221 Sim CL, Lincoln, NE 68526 Ice President Steve McKevey, 9221 Sim CL, Lincoln, NE 68526 Description of the Motor Vehicles -Attach an additional sheet, if necessary. Motor Vehicle Male Model Year Body Type Vehicle ID Number Begistration Inevrolat Truck E2T 2013 RWD 2500 135" Identify Difficuration Identify Steve Body Type Vehicle ID Number Body Type Vehicle ID Number Intervent Truck E2T 2013 RWD 2500 135" IGAWGRFAD1122233 Identify Difficuration Registration Identify Steve Identify Steve Important Truck E2T 2013 RWD 2500 135" IGAWGRFAD1123254 Important Took E2T 2013 RWD 2500 135" IGAWGRFAD1123264 Important Took E2T 2013 RWD 2500 135" IGAWGRFAD1123264 Important Starte Starte Starte Starter Sta						[5] M. C. Managara, M. M. M. Managara, A. M.	
Identify Officers, Directors, or Partners of the Nonprofit Organization itle Name, Address, City, Siles, Zp Code resident Steve McKevey, 9221 Siles, Zp Code itle President Steve McKevey, 9221 Siles, Zp Code result Steve McKevey, 9221 Siles, Zp Code result Description of the Motor Vehicles • Attach an additional sheet, if necessary. Pressure Motor Vehicle Make Model Year Body Type Vehicle ID Number Pressident Pressored Description of the Motor Vehicles • Attach an additional sheet, if necessary. Pressored Motor Vehicle Make Model Year Body Type Vehicle ID Number Pressored Pressored Intervention Religious IGAWGRFA2D1122233 Doc 22 Intervention Agricultural and Horticultural society Educational Religious IGAWGRFA2D1122254 Intervention Educational Religious IGAWGRFA2D1122253 Doc 22 Intervention Educational Religious Charitable Idea indicated? Intervention Educational Religious Charitable Idea indicated? <td></td> <td></td> <td></td> <td></td> <td>SS</td> <td></td> <td></td>					SS		
Itele Name, Address, City, State, Zip Code cas President Stave McKevley, 9221 Simi CL, Lincoln, NE 68526 cas President Stave Bowen, 8394 Lamme Circle, Lincoln, NE 68526 casurer Dave Wilcox, 5930 Culwells Road, Lincoln, NE 68516 Description of the Motor Vehicles •Attach an additional sheet, if necessary. Motor Vehicle Make Model Year Body Type Vehicle ID Number The Vehicle Make Model Year Body Type Vehicle ID Number The Vehicle ID Number President Not Vehicle Make Model Year Body Type Vehicle ID Number President Number Number Number Number Vehicle ID Number President Number Number Number Number Number Number Number Vehicle ID Number Intervity Pui Address of Motor Vehicles Impreside description of use, including an explanition if multiple u				ove of the			ic.org
resident Steve McKelvey, 921 Smi Ct., Lincoln, NE 68526 ce President Steve Bowen, 8934 Lammle Circle, Lincoln, NE 68526 resurer Dave Wilcox, 5930 Culwells Road, Lincoln, NE 68516 Description of the Motor Vehicles -Attach an additional sheet, if necessary. Motor Vehicle Make Motor Vehicle Make Model Year Body Type Vehicle ID Number registration Body Type revrolet Truck E2T 2013 RWD 2500 135" 1GAWGRFA2D1122233 evrolet Truck E2T 2013 ampt Uses of Motor Vehicle Religious Charitable Cemeatry are the motor vehicles used add as indicated? we detailed description of use, Including en explanation if multiple use dassilications exist: Are the motor vehicles used add thransport handicapped, elderly and other church members having no other means of insportation to Sunday services and other functions. Also used by youth, Scouts and other IN on the set of my knowledge and belef, it is correct and complete. Sign Authorized Signature Financial Secretary 11/5/218 Dete For County Treasurer Recommendation Date Approval Comments: Date <td< td=""><td></td><td></td><td></td><td>iers of the</td><td>Nonprofit Organizat</td><td>ion</td><td></td></td<>				iers of the	Nonprofit Organizat	ion	
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Authorized Signature Date	- •••		Authorized Sic	nature			Date

Please retain a copy for your records.

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

EBRASKA	aqA	lication fo	or Exe	emption		L
	om Motor Vehic	le Taxes by Qua	lifying 1	Nonprofit Organiza	ations	FORM
		• To be filed with y	your county	y treasurer,		457
ame of Organization			Type of O	wnership		(
ITAL Services, Inc.			X No	nprofit Corporation	Other (specify):	
me of Owner of Property			County N		State Where	Incorporated
400 Cornhusker Hwy Ste 250	0			Lancaster		Nebraska
eet or Other Meiling Address			Contact N		Phone Numb	
				Paul Vinton	4	402-465-5664
y incoln	State	Zlp Code	Emall Add			
	Ne	68507			Dvitalservices	o.org
			ers of th	e Nonprofit Organiz	ation	
e esident	Name, Address, City,					~~~~
		1955 Sewell St., Linc				······
e President		17 Galloway Ave., Li 5 E. 9th St., Hickman				
cretary		22 Oakridge Dr., Lin				
		ZZ Oakiluge Dr., Lin		10010		
			Mana			
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						Registration Date or
Motor Vehicle Make	Model Year	Body Type		Vehicle ID N	umber	Date of Acquisition, if Newly Purchased
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adae Caravan	2007	4 DR WIG	NSVT	2046243	1-87R 3142	59 W/6/11
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