Agenda Item # 36

File with Your		Applic	ation ic	or Exem	1 <b>9H</b> 011	16/21	FORM	
County Treasurer	fr	om Motor Vehicle Ta	xes by Qua	lifying Non	profit Organization		457	
Name of Organization • Read instructi				ns on reverse side.				
ST PATRICKS CA	ATHOLIC CE	HIRCH	2021					
Name of Owner of Propert		1011011		County Name State Where Incorporated			ncorporated	
The state of the s				DODGE		NE		
Street or Other Mailing Address				Contact Name Phone Number				
422 E 4TH ST								
City		State	Zip Code	Email Address				
FREMONT		NE	68025					
Type of Ownership				:				
Agricultural and Hor	ticultural Society	Educational Organiza	ation 🔀 R	leligious Organiza	ation Charitable	Organization	Cemetery Organization	
Name		Title of Officers, Directors, or Partners		Address, City, State, Zip Code				
WALTER NOLTE		REVEREND	REND					
			ription of the an additional				, , , , , , , , , , , , , , , , , , , ,	
Motor Vehicle Make		Model Year			Vehicle ID Numb		Registration Date or Date of Acquisition, if Newly Purchased	
intern 0566		2011	bus		4DRBUSKM6BB336084		ii iidiiiy i alondood	
							· · · · · · · · · · · · · · · · · · ·	
<del></del>		following exempt category (ple		,		Are the motor ve as indicated? (se	ehicles used exclusively	
Agricultural and Hor			X Religious	Charitab	ole Cemetery	do maiosido: (o	oo monaodono,	
Give a detail description of the use of the motor vehicle:						YES	□NO	
CUB SCOUT TRAILER FOR HAULING CAMPING GEAR								
TRANSPORT PARISHIONERS EQUIPMENT STUDENTS					į	If No, give perce	ntage of exempt use:	
Under pe	nalties of law, I de	clare that I have examined this	exemption applica	ation and, to the b	est of my knowledge and h	elief, it is correct	and complete.	
sign lalso declare	that I am duly a	thorized to sign this exemption	application,	110	1/10		1	
/ /				Asst. Krinc	NOCHAD	5/2	8/21	
here Authorized	Signature		Tit	le	1 /	Date	<i>f</i> .	
	U	For Cou	ınty Treasurer	Recommenda	tion			
Approval		Comments						
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☐ Denial			- /I û	1 0 1/	<del></del>			
			Mos	1/1/	Sand	5 A D-	I h hi	
			Mu	KA	WWXXA	est	10 d'd1	
			Signature of C				Date	
		For Count	ty Board of Eq	ualization Use	Only U			
Approval		If the County E	Board's determina	tion is different fro	om the County Treasurer's	recommendation	n, an explanation is required.	
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Denied								
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					ny knowledge and belief, t nt to the laws of the State		made by the County Board	
			or Equalization	Jones puloud	IS BID IGHO OF HIS SIGIE	o. , respiciently		
•	٠	ì					*****	
			<ul> <li>Signature of Co</li> </ul>	ounty Board Mem	iber		Date	