				Aces	ada T ien	# 246	
File with Verm	Applica	ation fo	r Exem	ntion	Date	12/37FORM	
File with Your County Treasurer from Motor Vehicle Taxes by Qual Read instructions				profit Organizat		457	
Name of Organization		icau matruction	Tax Year			1 12	
ST PATRICKS CATHOLIC C	HURCH		2020		-		
Name of Owner of Property			County Name			State Where Incorporated	
ST PATRICKS CATHOLIC CHURCH			DODGE		NE		
Street or Other Mailing Address 422 E 4TH ST			Contact Name Phone Number				
City	State	Zip Code	Email Address		,	10/1	
FREMONT	NE	68025	Gry 1				
Type of Ownership		and Had					
Agricultural and Horticultural Society	Educational Organiza	tion 🔀 R	eligious Organiza	ition Charitable	Organization	Cemetery Organization	
Name	Title of Officers, Directors, or Partners			Address, City, State, Zip Code			
WALTER L NOLTE	REVEREND	422 8	2 4th 3	+ Frement	NE 6	,8025	
Motor Vehicle Make	Description of the • Attach an additional Model Year Body Type		sheet, if necessary.		nber	Registration Date or Date of Acquisition, If Newly Purchased	
CHEV 2791	1997	PICKUP	1GCEK19R1VE174		74936	4936	
Notor Vehicle described above is used in the	more control of the c	ase mark the appl	licable boxes):	ole Cemetery	Are the motor vas indicated?	vehicles used exclusively	
Give a detail description of the use of the m CUB SCOUT TRAILER FOR HAUI RANSPORT PARISHIONERS EC	LING CAMPING GEAR				If No, give pero	NO sentage of exempt use:	
Under penalties of law, I declare that I am duly a sign full form of the sign and t	leclare that I have examined this authorized to sign this exemption	exemption applica application.	_	est of my knowledge and	d belief, it is correctly belief, it is correctly belief.	at and complete.	
	For Cou	inty Treasurer	Recommenda	tion			
Approval	Comments						

For County Board of Equalization Use Only

Approval

If the County Board's determination is different from the

If the County Board's determination is different from the County Treasurer's recommendation, an explanation is required.

Approval of a Portion

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Signature of County Board Member

☐ Approval of a Portion

☐ Denial

☐ Denied

Date