**SCHEDULE B**

**ACQUISITIONS AND DELETIONS IN 2021**

**SECTION 1 - Personal Property ACQUIRED during 2021**

Total Acquisition Cost and Quantity are required for accurate reporting. Supplies should be changed out yearly.

***\*Please do not calculate a Class Code or Percent Good Rate if you are unsure. Please call to verify.\****

**TO CALCULATE MARKET VALUE: COST X QUANTITY X PERCENT GOOD RATE = TAXABLE VALUE**

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| --- | --- | --- | --- | --- | --- | --- |
| **CLASS CODE** | **ITEM DESCRIPTION** | **YEAR ACQUIRED** | **COST OR PURCHASE PRICE** | **QUANTITY** | **PERCENT GOOD RATE** | **TAXABLE VALUE** |
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 **Section 1: Total Taxable Value Acquired:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 *(Transfer to Line 2 of the front of the Personal Property Affidavit.)*

**SECTION 2 - Personal Property DISPOSED of during 2021**

Items cannot be deleted unless they are currently printed on Schedule A and must match the value printed on Schedule A. (Back of White Form)

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| **CLASS CODE** | **ITEM DESCRIPTION** | **YEAR ACQUIRED** | **COST OR PURCHASE PRICE** | **QUANTITY** | **PERCENT GOOD RATE** | **TAXABLE VALUE** |
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 **Section 2: Total Taxable Value Disposed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 *(Transfer to Line 3 of the front of the Personal Property Affidavit.)*

**(PLEASE RETURN THIS FORM WITH SIGNED STATEMENT. ATTACH ADDITIONAL PAGES AS NEEDED)**

**~OVER~**

**SCHEDULE C**

**LEASED OR RENTED EQUIPMENT**

Please list ALL leased or rented equipment below.

**Do not transfer these totals to Schedule A.**

If your equipment is considered a “Conditional Sales Lease”, it must be listed on

Schedule A (White Form) or Schedule B (Blue Form).

**DO NOT INCLUDE MOTOR VEHICLES REGISTERED WITH THE STATE OF UTAH**.

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| --- | --- | --- | --- | --- | --- | --- |
| **Name of Business/Lessor** | **Phone, Email and/or Address of Lessor** | **Equipment Description****And Lease Number** | **Date Lease****Began** | **Terms of Lease** | **Property Value at Lease Date** | **Annual Rent/Lease Payments** |
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**(PLEASE RETURN THIS FORM WITH SIGNED STATEMENT. ATTACH ADDITIONAL PAGES AS NEEDED)**

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