| LAT 11 | - WATI | ERCRAF | T | | | | | 20 | PER | SONAL | PROPE | ERTY | TAX FORM | | | |
|--|----------------------|----------------|------------------|------------------|--|---------|---------------------|----------|------------------------------------|------------------------------------|------------------------|---------------|---------------|--|--|--|
| RETURN T | 0: | | | | | | NAME/AD | DRESS: | (INDICATE | E ANY CHANGE | S) | | | | | |
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| CONFIDEN | ITIAL RS | : 47:2327. Or | sor, the go | rity, and L | Legal Citation & Instructions: This report shall be filed with the | | | | | | | | | | | |
| | | iisiana Tax (| | | | | | | | | vithin forty-five days | | | | | |
| | | taxpayer so | purpose | ring this a | after receipt, whichever is later, in accordance with RS 47:2324. | | | | | | | | | | | |
| | | tute. | | | | | | | | | | | | | | |
| PROPERTY LOCATION: | | | | | | | | | WARD: ASSESSMENT | | | | | | | |
| (E911/PHYSICAL ADDRESS) | | | | | | | | | NUMBER: | | | | | | | |
| NAME OF BUSINESS: OWNER OR CONTACT: | | | | | | | | | TYPE OF BUSINESS: | | | | | | | |
| | | | | <u> </u> | PHONE NUMBER: | | | | | | | | | | | |
| LOCATION (IF DIFFERENT FROM MAILING ADDRESS): SHADED AREAS FOR ASSESSOR'S LISE ONLY _ LISE ATTACHMENTS IF NECESSARY | | | | | | | | | | | | | | | | |
| SHADED AREAS FOR ASSESSOR'S USE ONLY – USE ATTACHMENTS IF NECESSARY SECTION 1 – VESSELS | | | | | | | | | | | | | | | | |
| | | | | | | | 1 | 1 | | | | | | | | |
| VES | | NAME O | | | YEAR | YEAR | LENGTH & BREADTH | | LOCATION (PARISH OR DOCKING POINT) | | | DOINT | | | | |
| REGIST | IBER | | | EQMT. & ACCS. | | ACQ. | BUILT | BRE | ADIH | JANU | | | PREVIOUS YEAR | | | |
| 110.00 | IDLIK | | | | | | | | | 07 11107 | | <u> </u> | TETTOOD TETT | | | |
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| DAYS | HORSE- | TYPE OF | HULL | NO. OF | TYPE | . IF | SELF | EFF. | COST | FAIR MAR | KET VALUE | A! | SSESSED VALUE | | | |
| WORKED | POWER | VESSEL | MATERIAL | SCREWS | BARG | | ROPELLED | AGE | MULT. | | | | | | | |
| PRIOR YR | | | | | | | | | | | | | | | | |
| | | | | | | | YES | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| WORKED F | | | EB. MAR | | | MAY | | JUL. | AUG. | SEPT. | | NOV. | DEC. | | | |
| VES | RATION | NAME O | F VESSEL | COST INCL. YEA | | | YEAR BUILT | | | LOCATION (PARISH OR DOCKING POINT) | | | | | | |
| | IBER | | | EQMT. & AC | | | BUILI | DKE | חועא | JANU | | | PREVIOUS YEAR | | | |
| | | | | 7,000. | | | | | | | | | | | | |
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| DAYS | HORSE- | TYPE OF | HULL | NO. OF | TYPE | | SELF | EFF. | COST | FAIR MAR | KET VALUE | AS | SSESSED VALUE | | | |
| WORKED PRIOR YR | POWER | VESSEL | MATERIAL | SCREWS | BARG | GE PI | ROPELLED | AGE | MULT. | | | | | | | |
| PRIORIR | | | | | | | | | | | | | | | | |
| | | | | | | | YES | | | | | | | | | |
| WORKED F | PER MON.: | JAN. F | EB. MAR | R. APR | . N | 1AY | JUN. | JUL. | AUG. | SEPT. | OCT. | NOV. | DEC. | | | |
| VES | COST INCL. YEAR YEAR | | | | | | LOCATION | | | | | | | | | |
| REGISTRATION | | | | | | ACQ. | BUILT | BREADTH | | (PARISH OR DOCKING POINT) | | | POINT) | | | |
| NUMBER | | | | ACCS | ACCS. | | | | | JANU | ARY 1 | PREVIOUS YEAR | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | Х | | | | | | | | |
| DAVE | HORSE- | TYPE OF | 111111 | NO OF | TVDE | IE | CELE | FFF | COST | FAID MAD | VET VALUE | Α. | CCCCCD VALUE | | | |
| DAYS WORKED | POWER | TYPE OF VESSEL | HULL MATERIAL | NO. OF SCREWS | TYPE: | | SELF ROPELLED | EFF. | COST MULT. | | KET VALUE | A | SSESSED VALUE | | | |
| PRIOR YR | . OHER | 120022 | | CONLETTO | | _ | | 7.02 | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | YES | | | | | | | | | |
| WORKED F | PER MON.: | JAN. F | EB. MAR | R. APR | . N | /AY | JUN. | JUL. | AUG. | SEPT. | OCT. | NOV. | DEC. | | | |
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LAT11 1 of 2 12/8/2022

| SECTION 1 – VESSELS | | | | | | | | | | | | | | |
|--|-----------------|-------------------|------------------|------------------|-------------|-------------|--------------------------------|---------------------|---------------|---------------------------|-------------------------|------------------------------|--|--|
| VESSEL | | NAME OF VESSEL | | COST INCL. | | YEA | | LENGTH & BREADTH | | | ATION | | | |
| REGISTRATION | | | | EQMT. & ACCS. | | ACC | Q. BUILT | | | IAN | (PARISH OR L IUARY 1 | OOCKING POINT) PREVIOUS YEAR | | |
| NUMBER | | | | ACCS. | | | | | | JAI | IOAKI I | FILVIOUS ILAIX | | |
| | | | | | | | | X | | | | | | |
| DAYS WORKED PRIOR YR | HORSE- POWER | TYPE OF VESSEL | HULL MATERIAL | NO. OF SCREWS | TYPI BAR | , | SELF PROPELLED | EFF. AGE | COST MULT. | | ARKET VALUE | ASSESSED VALUE | | |
| | | | | | | | YES | | | | | | | |
| WORKED F | | | B. MAR | | | MAY | | JUL. | AUG. | SEPT. | | NOV. DEC. | | |
| VESSEL REGISTRATION | | NAME OF VESSEL | | | | YEA | | LENGTH & | | | | CATION | | |
| NUM | | | | EQMT. & ACCS. | | ACC | Q. BUILT | BREADTH | | JAN | IUARY 1 | PREVIOUS YEAR | | |
| | | | | | | | | , | x | | | | | |
| DAYS WORKED PRIOR YR | HORSE- POWER | TYPE OF VESSEL | HULL MATERIAL | NO. OF SCREWS | TYPI BAR | , | SELF PROPELLED | EFF. AGE | COST MULT. | | | ASSESSED VALUE | | |
| | | | | | | | YES | | | | | | | |
| WORKED F | PER MON.: | JAN. FE | B. MAR | . APR. | | MAY | JUN. | JUL. | AUG. | SEPT. | OCT. | NOV. DEC. | | |
| SECTION 2 - CONSIGNED GOODS, LEASED, LOANED, OR RENTED EQUIPMENT, FURNITURE, ETC. | | | | | | | | | | | | | | |
| | NAME AND | ADDRESS | PROPERTY DESC | | | RIPTION AGE | | MONTI RENT | | RESENT DAY LLING PRICE | FAIR MARKET VALUE | | | |
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| | | | | | | | | Ц. | TOTAL I | AIR MAR | KET VALUE: | | | |
| | | | | | | | | | | ASSES | SED VALUE: | | | |
| NOTE: PENALTIES FOR FAILURE TO FILE THIS FORM INCLUDE WAIVER OF RIGHTS TO APPEAL YOUR ASSESSMENT AND MAY INCLUDE A MONETARY PENALTY (RS 47:1992 & 2330) NEED ASSISTANCE? AFTER YOU REVIEW THE ENCLOSED TAX FOR AND YOU FEEL YOU NEED ASSISTANCE PLEASE CALL YASSESSOR LISTED ABOVE AT THANK YOU | | | | | | | | | | | CE PLEASE CALL YOUR | | | |
| SIGNATURE AND VERIFICATION | | | | | | | | | | | | | | |
| "I declare under the penalties for filing false reports (R.S. 14:125; up to 500.00 fine or imprisonment for one year or both, plus additional penalties defined in Act 2330B of the 1989 Regular Session) that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return." | | | | | | | | | | | | | | |
| | | | | | | | | | | | • | | | |
| SIGNATURE OF TAXPAYER DATE | | | | | | | SIGNATURE OF PREPARER | | | | | DATE | | |
| | | | | | | | | | | | | | | |
| PRINTED/TYPED NAME OF TAXPAYER | | | | | | | PRINTED/TYPED NAME OF PREPARER | | | | | | | |

LAT11 2 of 2 12/8/2022