То:	Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Age	ncy):
	County Clerk	<u> </u>	
	County of:		(Address)
Proje	ect Title:		
	ect Applicant:		
-	ect Location - Specific:		
,	'		
Proie	ect Location - City:	Project Locat	ion - County
Project Location - City: Project Location - County: Description of Nature, Purpose and Beneficiaries of Project:			
Name of Public Agency Approving Project:			
Name of Person or Agency Carrying Out Project:			
Exempt Status: (check one):			
	 Ministerial (Sec. 21080(b)(1); 15268); Declared Emergency (Sec. 21080(b)(3); 15269(a)); 		
	□ Emergency Project (Sec. 21080(b)(4); 15269(b)(c));		
	Categorical Exemption. State type and section number:		
		nber:	
Reasons why project is exempt:			
Lead	d Agency		
	Contact Person: Area Code/Telephone/Extension:		
	ed by applicant: 1. Attach certified document of exemption 2. Has a Notice of Exemption been filed b		proving the project? □ Yes □ No
Sign	ature:	_ Date:	Title:
	□ Signed by Lead Agency □ Signe	d by Applicant	Governor's Office of Planning & Research
Author	ity cited: Sections 21083 and 21110, Public Reso		te Received for filing at OPR:APR 27 2020
	nce: Sections 21108, 21152, and 21152.1, Public Reso		

STATE CLEARINGHOUSE