Certificate of Exemption

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or the data elements required on the form) to a state that would otherwise be due tax on this sale.

purc	chaser is 1	not eligible to clain	n this exemption	. A seller may no	t accept a certific	riminal penalties imposed by cate of exemption for an enti- es not allow such an entity-b	ty-based exemption on a sale
1 .	$\neg =$	Check if you are atta	ě .	* *		aws you are claiming exemption	on.
2.		Check if this certific	ate is for a single	purchase and ente	er the related invoi	ce/purchase order #	
3.	Please Name of	print f purchaser					
	Business	Address			City	Sta	ate Zip Code
	Purchase	er's Tax ID Number			State of Issue	Country	of Issue
		ID Number e of the following:	FEIN	Driver's L		ate Issued ID Number	Foreign diplomat number
	Name of	seller from whom y	ou are purchasin				<u> </u>
	Seller's a	address			City	Stat	e Zip code
4.	Type of	business. Circle th	e number that des	scribes your busing	ess		
	01	Accommodatio	on and food serv	rices	11	Transportation and ware	housing
	02		orestry, fishing,	hunting	12	Utilities	C
	03	Construction			13	Wholesale trade	
	04	Finance and ins			14	Business services	
	05		iblishing and co	mmunications	15	Professional services	
	06	Manufacturing			16	Education and health-ca	re services
	07	Mining Real estate			17	Nonprofit organization Government	
	08 09	Real estate Rental and leas	ina		18 19	Not a business	
	10	Retail trade	ang		20	Other (explain)	
5.	Reason	for exemption. Cir	cle the letter that	identifies the reaso	on for the exempti	on.	
	A	Federal govern	ment (departme	ent)	Н	Agricultural production	#
	В			ne)		Industrial production/ma	anufacturing #
	C						
	D	Foreign diplom	nat #		K	Direct mail #	

6. <u>Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.</u>
Signature of Authorized Purchaser Print Name Here Title Date

L

Other (explain)_

Charitable organization #

Resale #_

Religious or educational organization #_

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G

STATE	Reason for Exemption	Identification Number (If Required
AR		
IA		
IN		
KS		
KY		
MI		
MN		
NC		
ND		
NE		
NJ 		
NV		
OH		
OK RI		
SD		
TN		
UT		
VT		
WA —		
WI		
WV		
WY		
TA Direct Mail provision		
visions do not ap <u>ply in t</u> l	states will accept this certificate for exemption claims that	are valid in their respective state. SSUTA Direct Mail
following nonmember s visions do not apply in the	states will accept this certificate for exemption claims that	are valid in their respective state. SSUTA Direct Mail
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