## **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.

pur	chaser is 1	er will be held liable for any tax and intended eligible to claim this exemption. A ation operated by the seller within the	seller may not acce	ept a certific	ate of exemption for an entit	y-based exemption on a sale		
1.		Check if you are attaching the Multi-state	Supplemental form	l <b>.</b>				
		f not, enter the two-letter postal abbrevia	tion for the state un	der whose la	ws you are claiming exemption	on.		
2.		Check if this certificate is for a single pure	chase and enter the	related invoi	ce/purchase order #			
3.	Please	print						
		f purchaser						
	Business	Address		City	Star	te Zip Code		
	Purchaser's Tax ID Number		Stat	te of Issue	Country	Country of Issue		
		ID Number   FEIN e of the following:			ate Issued ID Number	Foreign diplomat number		
	Name of	seller from whom you are purchasing, le	State of Issue:	Number				
	Seller's a	address		City	State	e Zip code		
4.	Type of	<b>business.</b> Circle the number that describ	es your business					
	01	Accommodation and food services	3	11	Transportation and warel	nousing		
	02	Agricultural, forestry, fishing, hun	ting	12	Utilities	•		
	03	Construction		13	Wholesale trade			
	04	Finance and insurance		14	Business services			
	05	Information, publishing and comm	nunications	15	Professional services			
	06	Manufacturing		16	Education and health-car	e services		
	07	Mining		17	Nonprofit organization			
	08	Real estate		18	Government			
	09	Rental and leasing		19	Not a business			
	10	Retail trade		20	Other (explain)			

**5**. **Reason for exemption.** Circle the letter that identifies the reason for the exemption.

A	Federal government (department)	H	Agricultural production #
В	State or local government (name)	Ι	Industrial production/manufacturing #
C	Tribal government (name)	J	Direct pay permit #
D	Foreign diplomat #	K	Direct mail #
$\mathbf{E}$	Charitable organization #	$\mathbf{L}$	Other (explain)
F	Religious or educational organization #		

**6.** Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of Authorized Purchaser Print Name Here Title I

Signature of Authorized Purchaser Print Name Here Title Date

G

STATE	Reason for Exemption	Identification Number (If Required
AR		
GA		
IA		
IN		
KS		
KY		
MI		
MN		
NC		
ND		
NE		
NJ		
NV		
ОН		
OK		
RI		
SD		
TN		
UT		
VT		
WA		
WI		
WV UTA Direct Mail provis	sions are not in effect for Tennessee.	
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