Name of purchaser

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.

purch	purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the haser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale e at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.
1 .	Check if you are attaching the Multi-state Supplemental form. If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
2.	Check if this certificate is for a single purchase and enter the related invoice/purchase order #
3.	Please print

Business Address	City	State	Zip Code
Purchaser's Tax ID Number	State of Issue	Country of	Issue
If no Tax ID Number FEIN Enter one of the following:	Driver's License Number/State Issued	ID Number	Foreign diplomat number
	State of Issue: Number		
Name of seller from whom you are purchasing	ng, leasing or renting		
Seller's address	City	State	Zip code

4. Type of business. Circle the number that describes your business

01	Accommodation and food services	11	Transportation and warehousing
02	Agricultural, forestry, fishing, hunting	12	Utilities
03	Construction	13	Wholesale trade
04	Finance and insurance	14	Business services
05	Information, publishing and communications	15	Professional services
06	Manufacturing	16	Education and health-care services
07	Mining	17	Nonprofit organization
08	Real estate	18	Government
09	Rental and leasing	19	Not a business
10	Retail trade	20	Other (<i>explain</i>)

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)	I	Industrial production/manufacturing #
\mathbf{C}	Tribal government (name)	${f J}$	Direct pay permit #
D	Foreign diplomat #	K	Direct mail #
E	Charitable organization #	\mathbf{L}	Other (explain)
\mathbf{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

Signature of Authorized Purchaser Print Name Here Title Date

G

	Reason for Exe	mption	Identification Number (If Required
AR			
GA		_	
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 provis	ions are not in effect for Tennessee.		
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