



Sales Tax Exemption Certificate

Multi - Jurisdiction

Customer # _____

Seller Name		
Address		
City	State	ZIP

I Certify That

Name of Firm (Buyer)		
Address		
City	State	ZIP

Qualifies As (Check each applicable item)

- Wholesaler
 Retailer
 Manufacturer
 Charitable or Religious
 Political Subdivision or Governmental Agency
 Other (Specify)

If Other, specify here

1) and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or leased by us in the normal course of business which is:

_____ or

2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is:

- Political Subdivision or Governmental Agency
 Charitable or Religious
 Otherwise Exempt By Statute (Specify)

If Otherwise Exempt By Statute, specify here

City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number

If the list of states and cities is more than six(6), attach a list to this certificate.

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sale or Use Tax we will pay the tax due direct to proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be called until canceled by us in writing or revoked by the city or state.

General Description of products to be purchased from seller

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature (<i>owner, Partner or Corporate Officer</i>)	Title	Date
---	-------	------

Standard Municipal Home Rule Affidavit of Exempt Sale

This form is provided by home rule municipalities within the State of Colorado to record supporting information for any transaction on which an exemption from tax is claimed. The form is maintained by the seller for tax-exempt sales.

Furnish this form to the seller. Do not return this form to the taxing jurisdiction.

Purchase Details	
<input type="checkbox"/> Purchase for resale - or - <input type="checkbox"/> Purchase for wholesale (Qualifications may vary by jurisdiction – see instructions)	
State license number (not FEIN number): _____	Expiration: _____
Local license number (if applicable): _____	Issuing municipality: _____
<input type="checkbox"/> I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial: _____	
<input type="checkbox"/> Purchase by charitable organization (Exemptions may vary by jurisdiction – see instructions)	
State tax-exempt number (not FEIN number): _____	Issuing municipality: _____
Local tax-exempt number (if applicable): _____	
Payment information (required to meet one of the following):	
<input type="checkbox"/> Paid by cash and accompanied by a purchase order from the organization	
<input type="checkbox"/> Paid by check drawn on funds of the exempt organization	
<input type="checkbox"/> Paid by purchasing card bearing information of the exempt organization	
The embossed name of the card is: _____	
<input type="checkbox"/> Paid by commercial card not a personal credit card - card's last four digits: _____	
<input type="checkbox"/> Purchase for federal, state, or local government	
Credit card number (first six and last four only): _____ XX-XXXX- _____	
Federal government (payment information – required to meet one of the following):	
<input type="checkbox"/> GSA SmartPay2 card – fleet card with picture of a road and flag	
<input type="checkbox"/> GSA SmartPay2 card – purchase card with picture of a keyboard and flag	
<input type="checkbox"/> GSA SmartPay2 card – travel card with picture of an airplane and flag	
<input type="checkbox"/> GSA SmartPay2 card – integrated card with picture of an eagle and flag	
<input type="checkbox"/> Dept of Interior agency issued card – agency name: _____	
State and local government (payment information – required to meet one of the following):	
<input type="checkbox"/> Paid by cash and accompanied by purchase order issued by the government agency	
<input type="checkbox"/> Paid by check issued by and drawn on funds from the government agency	
<input type="checkbox"/> Paid by government purchase card as designated on the card	
State tax-exempt number printed on the card (Colorado only): _____	
<input type="checkbox"/> Check if the card states “for official state use only” or “tax exempt”	
<input type="checkbox"/> Purchase for foreign and diplomatic exemptions (required to meet the following):	
<input type="checkbox"/> Purchaser presents a state department issued card with the name/photo of the bearer on the card.	
If presented with this card, documentation of form of payment is not required (excluding mission card).	
<input type="checkbox"/> Other qualified exemption	
Nature of exemption: _____	Exempt number: _____

Purchaser Information			
Legal Name of Company/Organization/Agency Name			Purchaser Name (Printed)
Address	City	State	Zip + 4
Phone	Government Issued ID #	Description of Normal Course of Business	
Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent.			
Signature			Date

Seller Verification				
Seller Name	Location #	Date	Transaction ID	Employee ID# / Initials
Description of Items Purchased or Attach Duplicate Receipt/Invoice			Exempted Amount of Purchase	