



Sales Tax Exemption Certificate Multi - Jurisdiction

See page 2 for instructions

Last Name or Business Name		First Name		Middle Initial	
Address					
City			State	ZIP	
I Certify That					
Name of Firm (Buyer)					
Address					
City			State	ZIP	
Qualifies As (Check each applicable item)					
<input type="checkbox"/> Wholesaler		<input type="checkbox"/> Retailer		<input type="checkbox"/> Manufacturer	
<input type="checkbox"/> Political Subdivision or Governmental Agency		<input type="checkbox"/> Charitable or Religious			
		<input type="checkbox"/> Other (Specify)			
If Other, specify here					
<p>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 lease by us in the normal course of our business which is <input style="width: 150px; height: 20px;" type="text"/> or</p> <p>2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is:</p>					
<input type="checkbox"/> Political Subdivision or Governmental Agency		<input type="checkbox"/> Charitable or Religious		<input type="checkbox"/> 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
City or State	State Registration or ID Number	City or State	State Registration or ID Number	City or State	State Registration or ID Number
<p>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.</p>					
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 (MM/DD/YY)



To Our Customers:

In order to comply with the majority of state and local sales tax law requirements, it is necessary that we have in our files a properly executed exemption certificate from all of our customers who claim sales tax exemption. If we do not have this certificate, we are obligated to collect the tax for the state in which the property is delivered. If you are entitled to sales tax exemption, please complete the certificate and send it to us at your earliest convenience. If you purchase tax free for a reason for which this form does not provide, please send us your special certificate or statement.

***Lessor:** A form DR0440, "Permit to Collect Sales Tax on the Rental or Lease Basis" must be completed and submitted to the Department of Revenue for approval.

Caution To Seller: In order for the certificate to be accepted in good faith by the seller, the seller must exercise care that the property being sold is of a type normally sold wholesale, resold, leased, rented, or utilized as an ingredient or component part of a product manufactured by the buyer in the usual course of his business. A seller failing to exercise due care could be held liable for the sales tax due in some states or cities.

Misuse of this certificate by the seller, lessor, buyer, lessee, or the representative thereof may be punished by fine, imprisonment or loss of right to issue certificates in some states or cities.



Affidavit of Exempt Event

This form is used by Denver exempt organizations to claim exemption from Denver sales, use or lodger's tax for an event held at a Denver hotel, motel or other event venue. The vendor (hotel, motel or restaurant) is required to maintain a completed form for each tax-exempt sale pertaining to the stated event.

**Furnish this form to the seller. Retain this completed form for your records.
DO NOT RETURN TO THE DENVER TREASURY DIVISION UNLESS REQUESTED.**

Organization/Agency Information

Legal Name of Organization or Agency	Website		
Authorized Representative	Phone		
Address	City	State	Zip

Event Information

Name of Event	Date of Event
Description of Event	

Exemption Information

The exemption does not apply to food, beverage or lodging where the recipient of the food, beverage or lodging reimburses the organization in any way, such as by the purchase of a ticket, payment of a fee, or making an involuntary contribution.

Basis of Exemption Charitable Governmental

ALL OF THE STATEMENTS BELOW MUST BE TRUE FOR THE PURCHASE TO QUALIFY FOR TAX EXEMPTION

Indicate if all of the following statements are true for this event:

- | | | |
|-----|----|--|
| Yes | No | The purchase is included under, and is part of, the regular charitable functions and activities of the organization, or is purchased in a governmental capacity. |
| Yes | No | The transaction is billed directly to the organization and payment is made directly from organization funds. (Purchases of food or lodging by individuals do not qualify for the exemption even though the individual will be reimbursed by the organization or government.) |
| Yes | No | The participants at the event have not and will not reimburse the organization in any way for the event such as by purchase of a ticket, payment of a registration fee, or by making an involuntary contribution. |

Purchaser Information

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.

Purchaser's Signature	Date		
Print Name	Driver's License #	State	

For Use by Hotel/Motel/Restaurant or Other Vendor to Verify Exemption

This form should be completed in its entirety and retained, together with a completed "Standard Municipal Home Rule Affidavit of Exempt Sale" form and customer's letter of Denver exemption (issued to charitable organizations) for a minimum of four years to assist in documenting an exempt transaction.

Employee's Signature _____ Date _____

Denver Exemption Verified By
(Employee's Printed Name)



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

Purchase for resale - or - Purchase for wholesale (Qualifications may vary by jurisdiction – see instructions)

State license number (not FEIN number): _____ Expiration _____

Local license number (if applicable): _____ Issuing municipality: _____

I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial _____

Purchase by charitable organization (Exemptions may vary by jurisdiction)

State tax-exempt number (not FEIN number): _____

Local tax-exempt number (if applicable): _____ Issuing municipality: _____

Payment information (required to meet one of the following):

Paid by cash and accompanied by a purchase order from the organization

Paid by check drawn on funds of the exempt organization

Paid by purchasing card bearing information of the exempt organization

The embossed name of the card is: _____

Paid by commercial card not a personal credit card - card's last four digits: _____

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):

GSA SmartPay3 card – fleet card with picture of a road

GSA SmartPay3 card – purchase card with picture of an eagle

GSA SmartPay3 card – travel card with picture of an airplane

GSA SmartPay3 card – tax advantage card with picture of a hotel and car

GSA SmartPay3 card – integrated card with picture of a globe

State and local government (payment information – required to meet one of the following):

Paid by cash and accompanied by purchase order issued by the government agency

Paid by check issued by and drawn on funds from the government agency

Paid by government purchase card as designated on the card

State tax-exempt number printed on the card (Colorado only): _____

Check if the card states “for official state use only” or “tax exempt”

Purchase for foreign and diplomatic exemptions (required to meet the following):

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).

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

State / Driver License #

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



Standard Colorado Affidavit of Exempt Sale

This form is required by the State of Colorado for any transaction on which an exemption from state tax is claimed for charitable and government entities. The seller is required to maintain a completed form for each tax-exempt sale.

Furnish this form to the seller. Do not return this form to the State of Colorado.

Purchase Details					
<input type="checkbox"/> Purchase for resale - or - <input type="checkbox"/> Purchase for wholesale (see instructions) State license number (not FEIN number): _____ Issuing state _____ Expiration _____ (Attach a copy of state license) <input type="checkbox"/> I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial _____					
<input type="checkbox"/> Purchase by religious or charitable organization (exemptions may vary by jurisdiction) State tax-exempt number (not FEIN number): _____ (Attach a copy of state exemption certificate) 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 by 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 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 by 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).					
Purchaser Information					
Legal Name of Company/Organization/Agency Name			Purchaser Name (Printed)		
Address		City	State	Zip + 4	
Phone	State/Driver License #	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	