## **Declaration of Wholesale or Entity Sales Tax Exemption**

Legal Name    Sales Tax License or Exemption Number	1. Purchaser Information			License or Exemption Information	
Mailing Address  Phone Number  City  State ZIP Code  2. Wholesale Exemption. Mark the type of exemption, and describe your ordinary course of business.  Ordinary Course of Business, including the product(s) manufactured and/or sold:	Legal Name		Sales Tax	Sales Tax License or Exemption Number	
City  State ZIP Code  2. Wholesale Exemption. Mark the type of exemption, and describe your ordinary course of business.  Ordinary Course of Business, including the product(s) manufactured and/or sold:	Trade Name (if different)		State	Expiration Date	
2. Wholesale Exemption. Mark the type of exemption, and describe your ordinary course of business.  Ordinary Course of Business, including the product(s) manufactured and/or sold:	Mailing Address		Phone Nu	Phone Number	
Ordinary Course of Business, including the product(s) manufactured and/or sold:	City		State	ZIP Code	
Ordinary Course of Business, including the product(s) manufactured and/or sold:  Purchase for Resale	2. Wholesale Exemption. Mark the type of exemption, and describe your ordinary course of business.				
	☐ Purchase for Resale	Ordinary Course of Busin	ness, including the prod	uct(s) manufactured and/or sold:	
Manufacturing - Mark one of the following:	Manufacturing - Mark one of the following:				
☐ Ingredients or Component Parts	☐ Ingredients or Component Parts				
☐ Machinery, Machine Tools, and Parts	☐ Machinery, Machine Tools, and Parts				
Testing, Modification, or Inspection	Testing, Modification, or Inspection				
3. Entity Exemption. Enter a and b as required.					
a. Mark the type of entity.	a. Mark the type of entity.				
501(c)(3) Charitable Organization 501(c)(19) Veterans' Organization	501(c)(3) Charitable Organization	501(c)(19) Veterans' Organization			
U.S. or Colorado State or Local Government Affordable Housing Project	t				
Tribe or Member – For sales on or delivered to a Colorado reservation. Mark the type of qualifying purchaser:					
☐ Tribal Government ☐ Enrolled Tribal Member					
☐ Entity owned by tribe or member – Enter the total tribal ownership percentage:					
b. Mark the type of qualifying payment, unless the exemption is for a tribal member or entity owned by a tribe or member					
Purchase Authorization to be paid later					
☐ Cash with a purchase order from the entity ☐ Check issued by the entity	Cash with a purchase order from the entity	☐ Check	issued by the entity	,	
☐ U.S. Government GSA SmartPay3 Card ☐ Colorado State or Local Government Credit Card	☐ U.S. Government GSA SmartPay3 Card ☐ Colorado State o			overnment Credit Card	
Non-Government Credit Card bearing the entity name or branded for commercial use					
4. Other Exemption. Describe the exemption claimed and how your purchase qualifies.					
Exemption Claimed Qualifications	Exemption Claimed	Qualifications			
5. Purchaser Signature					
I declare that the purchases I make using this form qualify for exemption from Colorado sales and use taxes as entered above, and that I am the purchaser or have the authority to execute this form on behalf of the purchaser.					
Printed Name Title				<u> </u>	
Signature Date (MM/DD/YY)	Signature			Date (MM/DD/YY)	