## **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.

puro	chaser is r	not eligible to clair	n this exemption.	A seller may no	t accept a certific	iminal penalties imposed by rate of exemption for an ent es not allow such an entity-l	ity-based exe	emption on a sale
1.		Check if you are atta	aching the Multi-s	tate Supplemental	form.			
	I	f not, enter the two-	-letter postal abbre	eviation for the sta	te under whose la	ws you are claiming exempti	ion.	
2.		Check if this certific	ate is for a single	purchase and ente	r the related invoi	ce/purchase order #		
3.	Please	print						
		purchaser						
	Business	Address			City	St	ate	Zip Code
	Purchase	r's Tax ID Number			State of Issue	Country	y of Issue	
		ID Number   e of the following:	FEIN	Driver's Li		ate Issued ID Number	Foreign	diplomat number
	Name of	seller from whom y	ou are purchasing					
		e CO-OP, Inc. o						
	Seller's a		9		City	Stat		Zip code
	6000 F	reeport Ave, Su	uite 101		Memphis	<u>TN</u>	L	38141
4.	Type of	business. Circle th	e number that des	cribes your busine	ess			
	01	Accommodatio	n and food servi	ces	11	Transportation and ware	ehousing	
	02	Agricultural, fo	restry, fishing, l	nunting	12	Utilities		
	03	Construction			13	Wholesale trade		
	04	Finance and ins			14	Business services		
	05		iblishing and co	mmunications	15	Professional services		
	06	Manufacturing			16	Education and health-ca	re services	
	07	Mining			17	Nonprofit organization		
	08	Real estate			18	Government		
	09	Rental and leas	ing		19	Not a business		
	10	Retail trade			20	Other (explain)		

Э.	Reason for exemption.	Circle the	letter that	identifies t	the reason f	or th	e exemption.	

A	Federal government (department)	H	Agricultural production #
В	State or local government (name)	I	Industrial production/manufacturing #
C	Tribal government (name)	${f J}$	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 knowled;	ge and belief.
	Signature of Authorized Purchaser	Print Name Here	Title	Date

Resale #

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AR	Reason fo	or Exemption		Identification Number (If Required)
GA				
IA				
IN				
KS KY				
MI				
MN				
NC				
ND				
NE	_			
NJ				
NV				
OH —				
OK				
RI				
SD				
TN				
UT				
VT				
WA				
WI				
WV				
WY				
	ions are not in effect for Te	ennessee.		
TA Direct Mail provis		ificate for evenntion claims that a	1:1: 4	-: GOUTA Dis-4 M-il
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