SALES TAX CERTIFICATE

We are in the process of updating our tax certificates. Please take the time to fill out the certificate completely. Your cooperation and early reply to this matter is greatly appreciated.

Account Name

Street Address (P.O.. Box, If Any)

City State Zip

Telephone Number Fax Number

Shipping Address (If Different from Above:)

Street Address (P.O. Box, If Any)

City State Zip

Contact Person(s) Telephone Number or Ext.

Check Applicable Tax Status:

- ☐ **For Resale**
- ☐ **Government Institution**
- ☐ **Sales Tax Status will be noted on each Purchase Order**
- ☐ **Sales Tax will be paid direct to the State of Michigan**
- ☐ **Non-Profit Organization exempted by State of Michigan**
- ☐ **A sale to a church**
- ☐ **_____% taxable on each order**
- ☐ **All orders will be taxable unless otherwise specified in writing**
- ☐ **Other (Specify)** _____

Federal ID Number (Sales Tax ID Number) _____

THE PURCHASER ASSUMES LIABILITY FOR PAYMENT OF ANY TAX DUE IF THE ITEM(S) PURCHASED ARE FOR A TAXABLE PURPOSE.

Signature Title Date