

**Do not send this form to the Streamlined Sales Tax Governing Board.  
Send the completed form to the seller and keep a copy for your records.**

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.

The purchaser will be held liable for any tax and interest, and possible civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

**1. Check if you are attaching the Multistate Supplemental form.**

**If not, enter the two-letter abbreviation** for the state under whose laws you are claiming exemption.

**2. Check if this certificate is for a Single Purchase Certificate.** Enter the related invoice/purchase order # \_\_\_\_\_.

**3. A. Name of purchaser**

B. Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

C. Purchaser's tax ID number \_\_\_\_\_ State of Issue \_\_\_\_\_ Country of Issue \_\_\_\_\_

D. If no tax ID number, enter one of the following: FEIN \_\_\_\_\_

E. Driver's License Number/State Issued ID number \_\_\_\_\_ State of Issue \_\_\_\_\_

F. Foreign diplomat number \_\_\_\_\_

G. Name of seller from whom you are purchasing, leasing or renting \_\_\_\_\_

H. Seller's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Print or type

**4. Purchaser's Type of business.** Circle the number that best describes your business.

- |   |                                       |
|---|---------------------------------------|
| 01 Accommodation and food services            | 11 Transportation and warehousing     |
| 02 Agriculture, forestry, fishing, hunting    | 12 Utilities                          |
| 03 Construction                               | 13 Wholesale trade                    |
| 04 Finance and insurance                      | 14 Business services                  |
| 05 Information, publishing and communications | 15 Professional services              |
| 06 Manufacturing                              | 16 Education and health-care services |
| 07 Mining                                     | 17 Nonprofit organization             |
| 08 Real estate                                | 18 Government                         |
| 09 Rental and leasing                         | 19 Not a business                     |
| 10 Retail trade                               | 20 Other (explain) _____              |

Circle type of business

**5. Reason for exemption.** Circle the letter that identifies the reason for the exemption.

- |  |   |
|--|---|
| A Federal government (Department) _____  | H Agricultural Production # _____             |
| B State or local government (Name) _____ | I Industrial production/manufacturing # _____ |
| C Tribal government                      | J Direct pay permit # _____                   |
| D Foreign diplomat #                     | K Direct Mail # _____                         |
| E Charitable organization # _____        | L Other (Explain) _____                       |
| F Religious organization # _____         | M Educational Organization # _____            |
| G Resale # _____                         |   |

Circle or check reason for exemption

**6. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.**

Signature of authorized purchaser \_\_\_\_\_ Print name here \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Sign here

Name of Purchaser

State	Reason for exemption	Identification number (if required)
AR		
GA		
IA		
IN		
KS		
KY		
MI		
MN		
NC		
ND		
NE		
NJ		
NV		
OH		
RI		
OK		
SD		
TN		
UT		
VT		
WA		
WI		
WV		
WY		

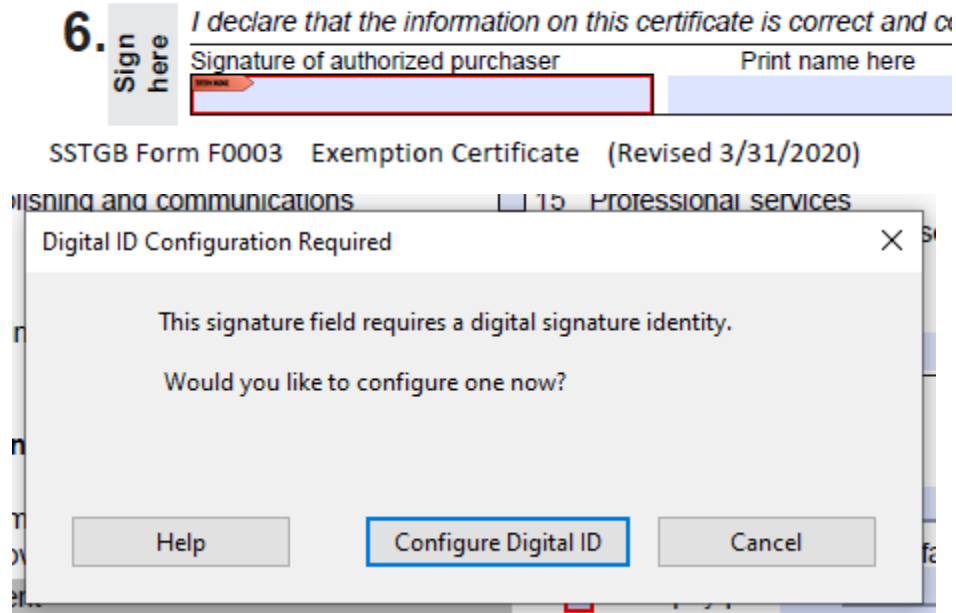
SSUTA Direct Mail provisions are not in effect for Tennessee.

The following nonmember states will accept this certificate for exemption claims that are valid in their respective state. SSUTA Direct Mail provisions do not apply in these states.

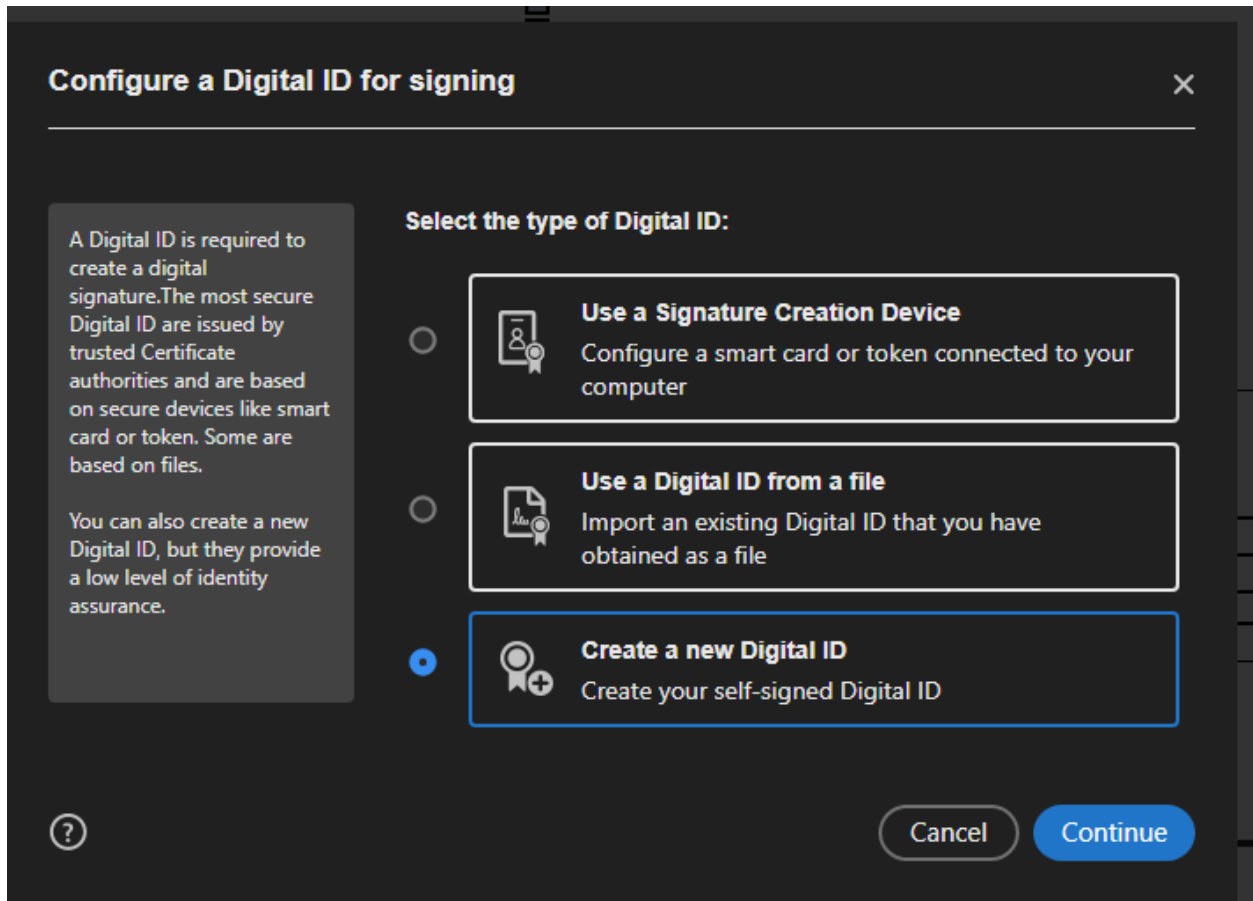
State	Reason for exemption	Identification number (if required)
XX		
XX		
XX		
XX		
XX		

# How To Digitally Sign Adobe PDF

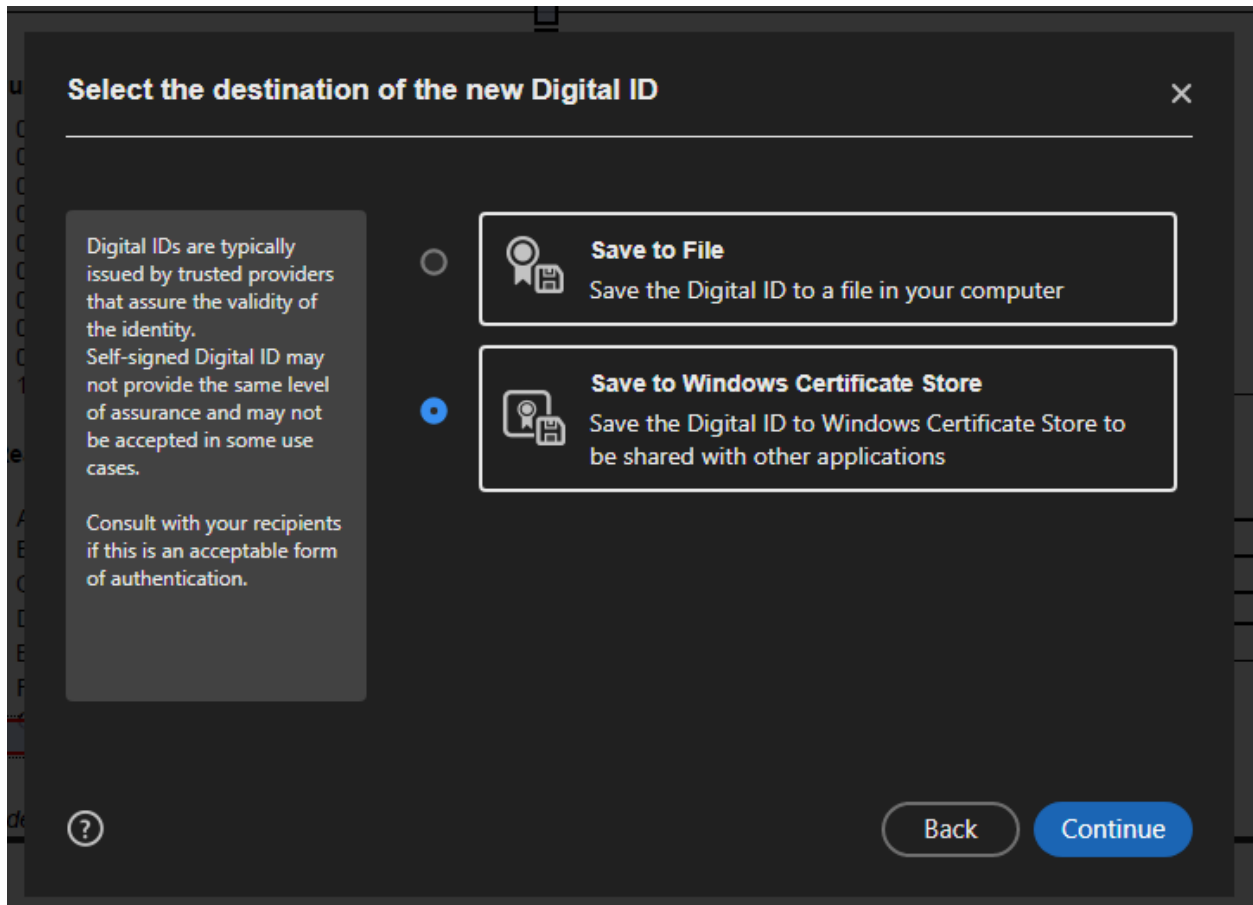
1. If using Adobe Reader to fill out the document, when selecting the “Signature of authorized purchaser” field, (if you do not currently have a Digital ID configured) you will be prompted to Configure Digital ID. Select the “Configure Digital ID” button in the dialog box that pops up.



2. Select the “Create a new Digital ID” option on the next screen > Continue



### 3. Select "Save to Windows Certificate Store" option > Continue



4. Enter your Name, Organization/Company Name, & Email Address > Save

### Create a self-signed Digital ID ✕

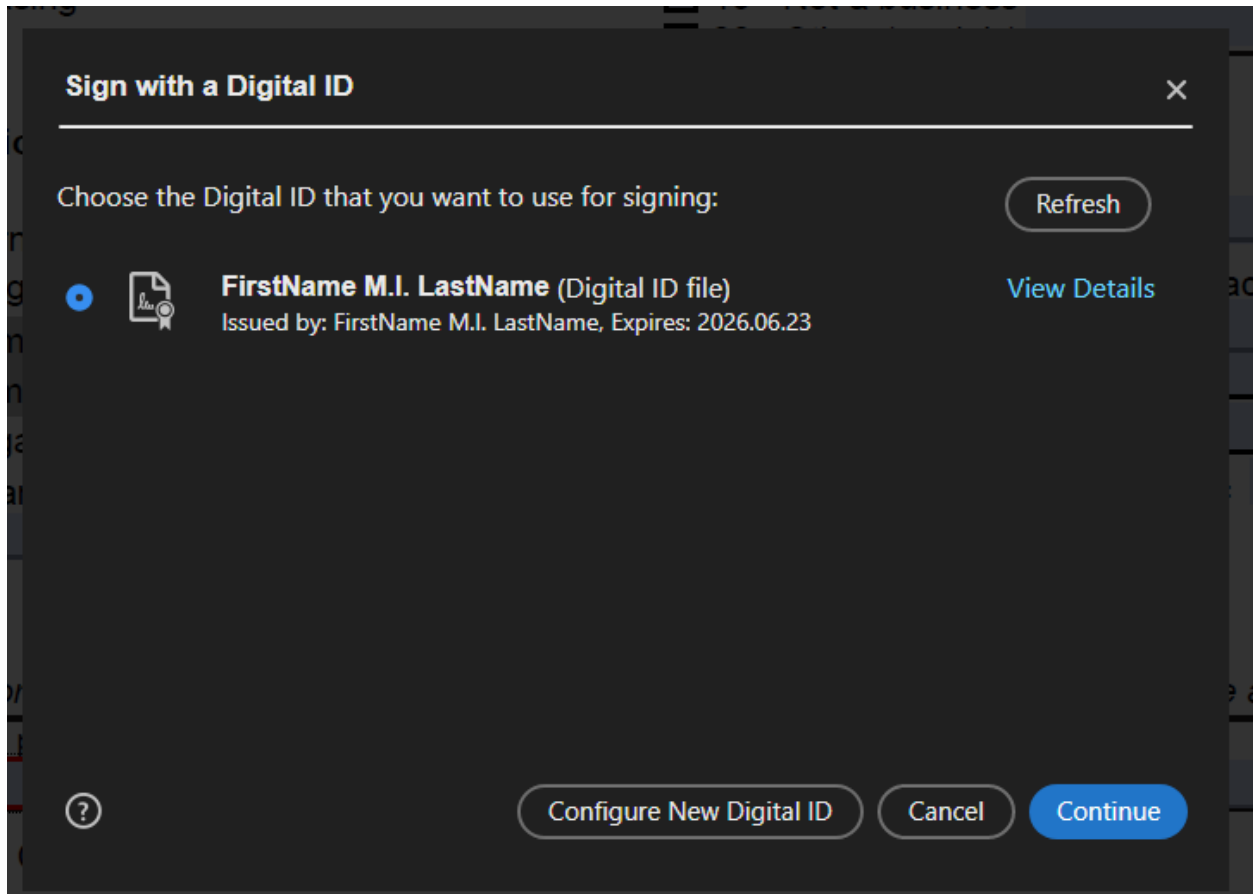
Enter the identity information to be used for creating the self-signed Digital ID.

Digital IDs that are self-signed by individuals do not provide the assurance that the identity information is valid. For this reason they may not be accepted in some use cases.

Name	<input type="text" value="First M.I. Last"/>
Organizational Unit	<input type="text" value="Enter Organizational Unit..."/>
Organization Name	<input type="text" value="LDI"/>
Email Address	<input type="text" value="support@langdieselinc.com"/>
Country/Region	<input type="text" value="US - UNITED STATES"/>
Key Algorithm	<input type="text" value="2048-bit RSA"/>
Use Digital ID for	<input type="text" value="Digital Signatures"/>

? Back Save

5. Select "Continue"



6. Select "Sign"

Sign as "FirstName M.I. LastName" ×

Appearance Standard Text ▼ Create

FirstName	Digitally signed by
M.I.	FirstName M.I.
LastName	LastName
	Date: 2021.06.23
	11:09:21 -05'00'

Lock document after signing View Certificate Details

Review document content that may affect signing Review

Back Sign



7. Your Digital Signature should now be displayed in the “Signature of authorized purchaser” field. Continue filling out the form if you have not yet completed it.

**6.** **Sign here** *I declare that the information on this certi*

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Signature of authorized purchaser

FirstName M.I. LastName Digitally signed by FirstName M.I. LastName  
Date: 2021.06.23 11:10:31 -05'00'

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8. Submit the form by selecting the “Submit” button towards the bottom of the page.

This will open your default email application, attach the PDF form for you, & insert [accounting@ldi.us](mailto:accounting@ldi.us) into the “To” field. If this method does not work, please save the form & send it as an attachment to the above address the way you are familiar with. Contact [accounting@ldi.us](mailto:accounting@ldi.us) if you have any questions regarding this process.

\*\*\*Note: there are other ways to sign the document if you are using an iPhone, iPad, or other mobile device. Please contact us at the above email address or **(785) 301-2426** if you need additional assistance.

Thank You