Richardson Supply LTD.
2080 Hardy Parkway
Grove City, OH 43123

Since 1968

Richardson Supply

Toll Free: (800) 635-7695
Local: (614) 539-3033
Fax: (614) 539-3032
E-mail: sales@richardsonsupply.com

Tax Exempt Form

Your Company Name _____   Phone Number _____

Select One: ☐ A. Purchase fr om Richardson Supply LTD. are subject to sales tax.

☐ B. Purchase from Richardson Supply LTD. are exempt from sales tax.

*If you selected "A" above, do not complete the remainder of this form!

Sales and Use Tax Blanket Certificate Of Exemption

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from: Richardson Supply LTD.

PURCHASER MUST STATE A VALID REASON FOR CLAIMING EXEMPTION OR EXCEPTION BY CHECKING ONE OF THE APPLICABLE BLOCKS BELOW.

☐   1. For resale in the form in which the same is, or is to be received

2. For use or consumption.

☐   A. As a material or part for incorporation into personal property to be produced for sale by manufacturing, assembling, processing or refining.

☐   B. Directly in production of personal property for sale by manufacturing, processing, refining, assembling or mining.

☐   C. Directly in production of personal property for sale by farming, agriculture, horticulture or floriculture.

☐   D. Directly in production of crude oil or natural gas.

☐   E. Directly in rendition of a public utility service.

☐   F. Directly in making retail sales.

☐   G. Directly in industrial cleaning of personal property.

☐   H. Directly in cleaning personal property used in rendition of a towel or linen service or supply.

☐   I. Directly in commercial finishing.

3. A sale

☐   A. To a church.

☐   B. To an organization not-for-profit, operated exclusively for charitable purposes in this state.

☐   4. OTHER (Describe below)

_____

_____

This certificate shall continue in force until revoked and shall be considered a part of each order given to the above vendor unless the order specifies otherwise.

_____   _____
Purchaser's Name   Purchaser's Activity, e.g, Manufacturer, church, Etc.

_____
Purchaser's Address, Street, City, State, and Zip

_____   _____   _____
Signature & Title   Date   Vendor's License Number, if any

www.richardsonsupply.com