

Standard Colorado Affidavit of Exempt Sale

This form is required by the State of Colorado for any transaction on which an exemption from state tax is claimed for charitable and government entities. The seller is required to maintain a completed form for each tax-exempt sale. **Furnish this form to the seller. Do not return this form to the State of Colorado.**

Purchase Details								
□ Purchase for resale - or - □ Purchase for wholesale (see instructions) State license number (not FEIN number): Issuing state Expiration (Attach a copy of state license) □ I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial								
□ Purchase by religious or charitable organization (exemptions may vary by jurisdiction) State tax-exempt number (not FEIN number): (Attach a copy of state exemption certificate) Payment information (required to meet one of the following): □ Paid by cash and accompanied by a purchase order from the organization □ Paid by check drawn on funds of the exempt organization □ Paid by purchasing card bearing information of the exempt organization The embossed name of the card is: □ Paid by commercial card not a personal credit card - card's last four digits: □ Paid by commercial card not a personal credit card - card's last four digits:								
 □ Purchase by federal, state, or local government Credit card number (first six and last four only:								
 □ Purchase by foreign and diplomatic exemptions (required to meet the following): □ Purchaser presents a state department issued card with the name/photo of the bearer on the card. If presented with this card, documentation of form of payment is not required (excluding mission card). 								
Purchaser Information								
Legal Name of Company/Organization/Agency Name Purchaser Name (Printed)								
Address				City		State	Zip + 4	
Phone	State/Driver License #			scription of Normal Course of Business				
Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent. Signature								
Seller Verification								
Seller Name			Date		Transaction ID	Employee ID# / Initials		
Description of Items Purchased or Attach Duplicate Receipt/Invoice						Exen	Exempted Amount of Purchase	