

Buyer's Name Youngstown State University			Seller's Name		
Address 1 University Plaza			Address		
City Youngstown	State OH	ZIP Code 44555	City	State	ZIP Code

Seller: Each exemption a customer may claim on this form has special rules (see instructions). It's your responsibility to learn the rules. You must charge tax to customers on goods that don't qualify for a claimed exemption and are taxable by law.

Buyer: Complete the section that applies to you.

1. Buying for Resale. I will sell, rent, or lease the goods I am buying in the regular course of my business.

a. Primary nature of business _____ Describe the products you sell, lease, or rent _____

b. Check the box that applies: Idaho registered retailer; seller's permit number _____
(required - see instructions)

Wholesale only; no retail sales Out-of-state retailer; no Idaho business presence

Idaho registered prepaid wireless service seller; E911 fee permit number _____
(required - see instructions)

2. Producer Exemptions (see instructions). I will put the goods purchased to an exempt use in the business indicated below.

- | | |
|---|---|
| <input type="checkbox"/> Broadcasting | <input type="checkbox"/> Production Exemption (check all that apply): |
| <input type="checkbox"/> Logging | <input type="checkbox"/> Fabricating <input type="checkbox"/> Hunting or Fishing <input type="checkbox"/> Manufacturing <input type="checkbox"/> Processing |
| <input type="checkbox"/> Publishing Free Newspapers | <input type="checkbox"/> Farming <input type="checkbox"/> Operation <input type="checkbox"/> Mining <input type="checkbox"/> Ranching |

List the products you produce: _____

3. Exempt Buyer. All purchases are exempt, and no permit number is required. Check the box that applies.

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Advocates for Survivors of Domestic Violence and Sexual Assault, Inc. | <input type="checkbox"/> Blind Services Foundation, Inc. | <input type="checkbox"/> Emergency Medical Service Agency (<i>nonprofit only</i>) | <input type="checkbox"/> Museum (<i>nonprofit only</i>) |
| <input type="checkbox"/> American Indian Tribe | <input type="checkbox"/> Canal Company (<i>nonprofit only</i>) | <input type="checkbox"/> Forest Protective Association | <input type="checkbox"/> Qualifying Health Organization (see instructions for list) |
| <input type="checkbox"/> American Red Cross | <input type="checkbox"/> Centers for Independent Living | <input type="checkbox"/> Government Entity (U.S./Idaho) | <input checked="" type="checkbox"/> School (<i>nonprofit only</i>) |
| <input type="checkbox"/> Amtrak | <input type="checkbox"/> Children's Free Dental Service Clinic (<i>nonprofit only</i>) | <input type="checkbox"/> Hospital (<i>nonprofit only</i>) | <input type="checkbox"/> Senior Citizen Center |
| | <input type="checkbox"/> Credit Union (state/federal) | <input type="checkbox"/> Idaho Foodbank Warehouse, Inc. | <input type="checkbox"/> Volunteer Fire Department |

4. Contractor Exemptions (see instructions).

a. Invoice, purchase order, or job number to which this claim applies _____

b. City and state where job is located _____

c. Project owner name _____


d. This exempt project is (check appropriate box)

- In a nontaxing state (To qualify, materials must become part of the real property)
- An agricultural irrigation project
- For production equipment owned by a producer who qualifies for the production exemption

5. Other Exempt Goods and Buyers (see instructions).

- | | |
|---|---|
| <input type="checkbox"/> Aerial tramway component or snowmaking/grooming equipment | <input type="checkbox"/> Heating fuel |
| <input type="checkbox"/> Aircraft (fixed-wing) primarily used as an air tactical group supervisor platform | <input type="checkbox"/> Irrigation equipment and supplies used for agriculture |
| <input type="checkbox"/> Aircraft primarily used to transport passengers or freight for hire | <input type="checkbox"/> Livestock sold at a public livestock market |
| <input type="checkbox"/> Aircraft purchased by nonresident for out-of-state use | <input type="checkbox"/> Medical items that qualify |
| <input type="checkbox"/> American Indian buyer holding Tribal ID No. _____
This form doesn't apply to vehicles or boats (see instructions) | <input type="checkbox"/> Pollution control items |
| <input type="checkbox"/> Church buying goods for food bank or to sell meals to members | <input type="checkbox"/> Research and development goods |
| <input type="checkbox"/> Food bank or soup kitchen buying food or food service goods | <input type="checkbox"/> Other goods or entity exempt by law under the following statute (required) _____ |

By signing this form, I certify that the statements I made on this form are true and correct. I know that submitting false information can result in criminal and civil penalties.

Buyer's Signature 	Buyer's Name (please print) David McCracken	Title Director of Procurement Service
Buyer's Federal EIN or Driver's License Number and State of Issue 34-1011998		Date 1-21-20

Sales and Use Tax Blanket Exemption Certificate

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

(Vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

This sale is exempt under Ohio law, pursuant to Ohio Revised Code Section 5739.02(B)(1), as a sale to the State of Ohio or any of its political subdivisions. Purchases of the Telecommunication Services are exempt as defined by Ohio **Revised Code Section 5739.01(B)(3)(F) and 5739.01(AA)**.

This certificate shall continue in force until revoked. It shall be considered a part of each order given the above-named vendor unless otherwise specified.

Purchaser must state a valid reason for claiming exception or exemption.

Youngstown State University

Purchaser's name

Higher Education

Purchaser's type of business

One University Plaza

Street address

Youngstown, Ohio 44555

Qty, state, ZIP code

David McCracken

Director, Procurement Services

Signature

Title

07/30/2021

Date signed

50-21379

Vendor's license number, if any

Federal Tax ID Number: 34-1011998

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either rule 5703-9-10 or 5703-9-25 of the Administrative Code. This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.
