## Declaration of Wholesale or Entity Sales Tax Exemption

1. Purchaser Information			License or Exemption Information	
Legal Name City of Fort Morgan		Sales Tax License or Exemption Number 09803576		
Trade Name (if different)		State	Expiration Date	
		CO		
Mailing Address PO BOX 100		Phone Number 970-542-3903		
City		State	ZIP Code	
Fort Morgan		CO	80701	
Wholesale Exemption. Mark the type of exemption, and describe your ordinary course of business.  Ordinary Course of Business, including the product(s) manufactured and/or sold:				
Purchase for Resale	Ordinary Course of Busi	ness, including the prod	duct(s) manufactured and/or sold:	
Manufacturing - Mark one of the following:				
☐ Ingredients or Component Parts				
Machinery, Machine Tools, and Parts				
Testing, Modification, or Inspection				
3. Entity Exemption. Enter a and b as required.				
a. Mark the type of entity.				
501(c)(3) Charitable Organization	501(c)(19) Veterans' Organization			
☑ U.S. or Colorado State or Local Government	J.S. or Colorado State or Local Government Affordable Housing Project			
Tribe or Member – For sales on or delivered to a Colorado reservation. Mark the type of qualifying purchaser:				
Tribal Government Enrolled Tribal Member				
Entity owned by tribe or member – Enter the total tribal ownership percentage:				
b. Mark the type of qualifying payment, unless the exemption is for a tribal member or entity owned by a tribe or member.				
☐ Purchase Authorization to be paid later				
Cash with a purchase order from the entity	Check	issued by the entit	y	
U.S. Government GSA SmartPay3 Card	▼ Colorado State or Local Government Credit Card			
Non-Government Credit Card bearing the entity name or branded for commercial use				
4. Other Exemption. Describe the exemption claimed and how your purchase qualifies.				
Exemption Claimed Qualifications				
SALES TAX EXEMPTION-PURCHSES FOR	PURCHASES FOR MUNICIPAL USE ONLY- NOT FOR RESALE			
MUNICIPAL USE ONLY- NOT FOR RESALE	LY- NOT FOR RESALE			
	- P			
E. Duvehener Signature				
5. Purchaser Signature				
I declare that the purchases I make using this form qualify for exemption from Colorado sales and use taxes as entered above, and that I am the purchaser or have the authority to execute this form on behalf of the purchaser.				
Printed Name Monica M. Houchen		Title General Accountant		
Signature - 0 - 1/		Ochoral Accounta	Date (MM/DD/YY)	
Monica M. Houchen			05/03/2024	