## Streamlined Sales and Use Tax Agreement

## **Certificate of Exemption**

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 possibly 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

nac	de at a location operated by the seller within the de	esignated state if the state doe	s not allow such an entity-base	ed exemption.	
1.	Check if you are attaching the Multi-state S	Supplemental form.			
	AR If not, enter the two-letter postal abbreviati		ws you are claiming exemption.		
2.	Check if this certificate is for a single purch	hase and enter the related invoice	ce/purchase order #		
3.	Please print				
	Name of purchaser				
	Industrial Supply & Service LLC Business Address	City	State	Zip Code	
	8203 Distribution Dr	Little Roc		72209	
	Purchaser's Tax ID Number	State of Issue	Country of		
	27-1585114	LA	US		
	If no Tax ID Number   FEIN Enter one of the following:	Driver's License Number/Sta	te Issued ID Number	Foreign diplomat number	
	Enter one of the following.	State of Issue: Number			
	Name of seller from whom you are purchasing, lea	sing or renting			
	Northern Tool Seller's address	City	State	Zip code	
	10010 Interstate 30	Little Rock		72209	
4.	Type of business. Circle the number that describe	s your business			
			lm		
	01 Accommodation and food services		11 Transportation and warehousing 12 Utilities		
	02 Agricultural, forestry, fishing, hunti 03 Construction		13 Wholesale trade		
	04 Finance and insurance	14	Business services		
	05 Information, publishing and commu	<b></b>	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) Sales and S	Service	
_					
<b>5. Reason for exemption.</b> Circle the letter that identifies the reason for the exemption.					
	<b>A</b> ☐ Federal government (department)	нП	Agricultural production #_		
	B State or local government (name)	Not Applicable I	Industrial production/manufacturing #		
C Tribal government (name) Not A  D		ot Applicable J	Direct pay permit #		
		K	Direct mail #		
	E Charitable organization #	L 🔲	Other (explain)		
	F Religious or educational organization	on # Not Applicable			
	G Resale # 12122141-SLS	·			
_				11 1: 6	
5.	Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.  ignature of Authorized Purchaser Print Name Here Title Date				
		Lenee Barnhill	Office Manager	03/05/2025	
	Lenee Barnhill	Lence Daniiiii	Office Mariager	03/03/2023	