



ENGINEERING SUPPLY
AND IMAGING

NEW CUSTOMER INFORMATION

Date 10/12/17

Company Name Labor Law Poster Service

Bill to Address 5859 W. Saginaw Hwy. #343

City Lansing State MI Zip Code 48917

Phone (517) 321-4144 Fax (517) 321-9441

Accounts Payable Contact Amber Blais Phone (517) 321-4144 x354

Email ab.LLPS@comcast.net

IMPORTANT

Is your company NON-TAXABLE (please circle)

If you are non-taxable, please complete attached Michigan Tax Exemption Certificate and return with this form

Machine Location 6323 W. Saginaw Hwy. Ste. E

City Lansing State MI Zip Code 48917

Contact Person Michael Bishop (Operations Manager)

Phone (517) 321-4144 x355 Email mikeb.LLPS@comcast.net

Equipment to be worked on:

Brand Name HP Contact Person Daniel Austin

Model No. HP PageWide XL 8000PS Phone (517) 321-4144 x363

Serial No. MY72D7Q00G Email danavustin.LLPS@gmail.com

Credit Card Information – only need to be filled out if using a credit card

Card # _____ Exp Date _____

Security Code _____

I will also need the address numbers that the credit card bill goes to. (EX: 123 Main St, 49424)

Please return to camip@engineeringsupply.com or Fax 616-392-7741

Michigan Sales and Use Tax Certificate of Exemption

DO NOT send to the Department of Treasury. Certificate must be retained in the seller's records. This certificate is invalid unless all four sections are completed by the purchaser.

SECTION 1: TYPE OF PURCHASE

- ☐ A. One-Time Purchase
Order or Invoice Number: _____
- ☐ C. Blanket Certificate
Expiration Date (maximum of four years): _____
- ☒ B. Blanket Certificate Recurring Business Relationship

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made from the vendor listed below. This certifies that this claim is based upon the purchaser's proposed use of the items or services, OR the status of the purchaser.

Vendor's Name and Address

SECTION 2: ITEMS COVERED BY THIS CERTIFICATE

Check one of the following:

1. ☒ All items purchased
2. ☐ Limited to the following items: _____

SECTION 3: BASIS FOR EXEMPTION CLAIM

Check one of the following:

1. ☐ For Resale at Retail. Enter Sales Tax License Number: _____
2. ☐ For Lease. Enter Use Tax Registration Number: _____

The following exemptions DO NOT require the purchaser to provide a number:

3. ☒ For Resale at Wholesale
4. ☐ Agricultural Production. Enter percentage: _____ %
5. ☐ Industrial Processing. Enter percentage: _____ %
6. ☐ Church, Government Entity, Nonprofit School, or Nonprofit Hospital (Circle type of organization)
7. ☐ Nonprofit Internal Revenue Code Section 501(c)(3) or 501(c)(4) Exempt Organization (must provide IRS authorized letter with this form)
8. ☐ Nonprofit Organization with an authorized letter issued by the Michigan Department of Treasury prior to June 1994 (must provide copy of letter with this form).
9. ☐ Rolling Stock purchased by an Interstate Motor Carrier
10. ☐ Other (explain): _____

SECTION 4: CERTIFICATION

I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted the statutes, administrative rules and other sources of law applicable to my exemption, and that I have exercised reasonable care in assuring that my claim of exemption is valid under Michigan law. In the event this claim is disallowed, I accept full responsibility for the payment of tax, penalty and any accrued interest, including, if necessary, reimbursement to the vendor for tax and accrued interest.

Business Name Labor Law Poster Service		Type of Business (see codes on page 2) 16
Business Address 6323 W. Saginaw Hwy, Ste. E		City, State, ZIP Code Lansing, MI 48917
Business Telephone Number (include area code) (517) 321-4144 x355		Name (Print or Type) Michael Bishop
Signature and Title Michael Bishop		Date Signed 10/12/17

Instructions for completing Michigan Sales and Use Tax Certificate of Exemption

Purchasers may use this form to claim exemption from Michigan sales and use tax on qualified transactions. It is the Purchaser's responsibility to ensure the eligibility of the exemption being claimed. All claims are subject to audit. Non-qualified transactions are subject to tax, statutory penalty and interest.

Sellers are required to maintain records, paper or electronic, of completed exemption certificates for a period of four years. Michigan does not issue "tax exempt numbers" and a seller may not rely on a number for substitution of an exemption certificate. Other documentation that sellers in the State of Michigan may accept are the Uniform Sales and Use Tax Certificate approved by the Multistate Tax Commission, the Streamlined Sales and Use Tax Agreement Certificate of Exemption, the same information in another format from the purchaser, or resale or exemption certificates or other written evidence of exemption authorized by another state or country.

SECTION 1:

Place a check in the box that describes how you will use this certificate.

- A) Choose "One-Time Purchase" and include the invoice number this certificate covers.
- B) Choose "Blanket Certificate" if there is a "recurring business relationship." This exists when a period of not more than 12 months elapses between sales transactions between the seller and purchaser.
- C) Choose "Blanket Certificate" and enter the expiration date (maximum four years) when there is a period of more than 12 months between sales transactions.

Print the vendor's name and address in the area provided.

SECTION 2:

Place a check in the box for "All items purchased" or choose "Limited to" and list the items that are covered by the exemption claim.

SECTION 3:

Place a check in the box that applies and provide the additional information requested for that exemption. The exemptions listed are the most common. If the exemption you are claiming is not listed use "Other" and enter the qualifying exemption.

SECTION 4:

Use the number that describes your business or explain any other business type not provided.

01	Accommodations	09	Transportation
02	Agricultural	10	Utilities
03	Construction	11	Wholesale
04	Manufacturing	12	Advertising, newspaper
05	Government	13	Non-Profit Hospital
06	Rental or leasing	14	Non-Profit Educational
07	Retail	15	Non-Profit 501(c)(3) or 501(c)(4)
08	Church	16	Other

Print the name of the business, address, city, state and zip code. Sign and provide your title (i.e. owner, president, treasurer, etc.) Provide your printed name and date the certificate.

DO NOT SEND THIS EXEMPTION CERTIFICATE TO THE DEPARTMENT OF TREASURY.