

## **Purchases for Resale by Foreign Purchaser**

Louisiana R.S. 47:301(10)(a)(i)

Louisiana Department of Revenue P.O. Box 201 Baton Rouge, LA 70821-0201 Telephone: (855) 307-3892 www.revenue.louisiana.gov

		Purchase	r Information				
Legal Name							
Business Name							
Mailing Address	<b>i</b>						
City				State	ZIP		
Location Addres	ss						
City				State	ZIP		
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Please provide the following information:							
Domicile State			Domicile Tax Account Number				
Demisile Lieene	a Number	Diago chook appropriate how					
Domicile License	e Number	Please check appropriate box:  Retail license number	☐ Wholesale license nur	mber [	∃Manu	facturer's license num	ner
are exempt fro	m state sales tax unde	I or further processed into ne er the provisions of Louisiana to state sales tax, the purch	Revised Statute 47:301	(10)(a)(i)	. The p		_
		Auth	orization				
Under penaltie true, correct a		that I have examined this exe	emption certificate and to	the best	of my l	knowledge and belief,	t is
	haser (please print)		Date (mm/dd/yyyy)				
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Signature			Purchaser Title				
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		Seller I	nformation				
Seller Name			IIIOIIIIatioii				
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Location address	s		mormation				
Location address	s		mormation				
Location address	s		mormation		State	Zip	
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	s From	Applicable S				Zip	
	From	Applicable S	State Sales Tax Rates To		R	ate	
		Applicable S	State Sales Tax Rates		R 0		

CAUTION: Misuse of this exemption certificate will subject the purchaser or seller to payment of the tax and all civil or criminal penalties provided for by Title 47 of the Louisiana Revised Statutes.

Notice to Seller: Report this sale on Schedule A, Line 29, sales for resale.