

This form is to be completed and given to your contractor.

Address E-mail Address Project Number Project Begin Date (MM/DD/YYYY) Description of Project Project Location City State State Project End Date (N	•
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Project Number Project Begin Date (MM/DD/YYYY) ————————————————————————————————	•
Description of Project	
Project Location Certificate Expiration Date (MI	•
Provide a signed copy of this certificate, along with a copy of the exempt entity's Missouri Sales and Use T Letter to each contractor or subcontractor who will be purchasing tangible personal property for use in this pr responsibility of the exempt entity to ensure the validity of the information on the certificate. The exempt entity mu certificate if any of the information changes.	roject. It is the ust issue a new
Signature of Authorized Exempt Entity Printed Name of Authorized Exempt Entity Date (MM/DD/YY) /	•
The Missouri exempt entity named above hereby authorizes the purchase, without sales tax, of tangible personal incorporated or consumed in the construction project identified herein and no other, pursuant to Section 144.062 penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct Name of Purchasing Contractor Signature of Contractor Date (MM/DD/YYY)	2, RSMo. Unde ect.
/	ZIP Code
Contractors - Present this to your supplier in order to purchase the necessary materials tax exempt. Complete the portion if extending the certificate to your subcontractor. The contractor must sign the form in the space provi	
Name of Purchasing Subcontractor Address City State	ZIP Code
Signature of Contractor Contractor's Printed Name Date (MM/DD/YY)	•

Form 5060 (Revised 11-2019)

Taxation Division Phone: (573) 751-2836 P.O Box 358 Fax: (573) 522-1666

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