

**MISSISSIPPI SALES TAX EXEMPTION AFFIDAVIT**

**Seller: Restaurant Equipppers, Inc.**

**635 West Broad Street**

**Columbus, OH 43015**

**Buyer:** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DESCRIPTION OF THE ITEMS PURCHASED: FOOD SERVICE EQUIPMENT AND SUPPLIES**

\_\_\_\_ CHECK (X) IF BLANKET CERTIFICATE.

\_\_\_\_ CHECK (X) IF SINGLE PUCHASE ONLY, AND ENTER THE DATE OF SALE \_\_\_\_\_

Please Check (X) the appropriate line under which your exemption is being claimed & attach any required documentaion that is indicated

**Resale, Wholesale and Manufacturer**

ATTACH COPY of "Sales Tax Permit" or "Use Tax Permit" issued by Mississippi Dept. of Revenue.

**Mississippi Public and Non Profit Schools**

ATTACH COPY of Revenue "Letter Ruling" from Mississippi Dept. of Revenue stating that the organization is exempt.

**Other Exempt Non-Profit Organization**

ATTACH COPY of Revenue "Letter Ruling" from Mississippi Dept. of Revenue stating that the organization is exempt.

**Mississippi Government Entity**

ATTACH COPY of Revenue "Letter Ruling" from Mississippi Dept. of Revenue stating that the organization is exempt.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_