

**CLAIM FOR EXEMPTION FROM DENVER SALES, USE OR LODGER'S TAX  
FOR USE BY HOTELS, MOTELS AND RESTAURANTS  
FOR THE FOLLOWING DESCRIBED EVENT:**

**Organizations Name:** \_\_\_\_\_  
**Date of Event:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Authorized Representative:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Description on Event:** \_\_\_\_\_  
**Basis of Exemption:**    **Religious** \_\_\_\_\_    **Charitable** \_\_\_\_\_    **Governmental** \_\_\_\_\_

**DO NOT HAVE CUSTOMER COMPLETE THIS FORM IF EVENT IS A FUND RAISER. NO EXEMPTION IS ALLOWED FOR FUND RAISING EVENTS.**

**Indicate if all of the following are TRUE for this event:**

**True**    **False**

\_\_\_\_\_    \_\_\_\_\_    The purchase is included under and is part of the regular religious or charitable functions and activities of the organization, or is purchased in a governmental capacity.

\_\_\_\_\_    \_\_\_\_\_    The transaction is billed directly to the organization and payment is made directly from the organization funds. (Purchases of food or lodging by individuals do not qualify for the exemption even though the individual may be reimbursed by the organization or government.)

\_\_\_\_\_    \_\_\_\_\_    The participants at the event have not and will not reimburse the organization in any way for any portion of the event such as by purchase of a ticket, payment of a registration fee, or by making a contribution towards the cost of participation. This statement must be marked "False" if event is a Fundraiser.

The Exemption does not apply to food, beverage, or lodging where the recipient of the food, beverage or lodging reimburses the organization in any way such as by purchase of a ticket, payment of a fee, or making a contribution toward the cost of participation.

**ALL OF THE ABOVE MUST BE TRUE FOR THE PURCHASE TO QUALIFY FOR EXEMPTION**

The undersigned declares and affirms that the above statements are true and accepts liability for the tax should the transaction not qualify for exemption.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

---

**FOR HOTEL/MOTEL/RESTAURANT USE TO VERIFY EXEMPTION:**

DENVER TREASURY DIVISION – TAX COMPLIANCE, AUDIT UNIT, CITY OF DENVER –720-865-7211

DENVER CITY TAX EXEMPT STATUS VERIFIED BY: \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_  
Hotel Employee                      Date: \_\_\_\_\_

NAME OF PERSON AT CITY: \_\_\_\_\_

**IMPORTANT: This form does not relieve the vendor of its obligation to verify that all conditions for the exemption have been met. All exempt transactions are subject to audit, and the vendor may be held responsible for the transactions exempted in error.**

TPS 008 (1/94)

## ***Affidavit of Non-Taxable Sale to Tax-Exempt Organization***

The undersigned declares, under penalties of perjury, that the tangible personal property or taxable service purchased without payment of otherwise applicable Colorado sales tax(es) from

Vendor Name
Vendor Address

is to be paid from the tax-exempt organization's funds and that said organization has not and will not receive any reimbursement through either direct payment, collection or "donation" from any person(s) for the use or consumption of said tangible personal property or service.

Signature	Title
Name of Tax-Exempt Organization	
Sales Tax Exemption Number	Date

# SALES TAX EXEMPTION CERTIFICATE MULTI - JURISDICTION

**See reverse side for instructions.**

Issued to (Seller)		Address	
<b>I CERTIFY THAT</b>		Name of Firm (Buyer)	
Street Address or Post Office Box Number		State	
City		ZIP Code	
<input type="checkbox"/> WHOLESALER <input type="checkbox"/> RETAILER <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> LESSOR* (See note on reverse side) <input type="checkbox"/> CHARITABLE OR RELIGIOUS <input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHER (Specify) _____		1) and is registered with the below listed states and cities within which your firm would deliver purchases to us which are for resale or lease by us in the normal course of our business which is _____ or _____ 2) that such purchases are exempt from payment of sales or use tax in such states and cities because our buyer is: <input type="checkbox"/> CHARITABLE OR RELIGIOUS <input type="checkbox"/> POLITICAL SUBDIVISION OR GOVERNMENTAL AGENCY <input type="checkbox"/> OTHERWISE EXEMPT BY STATUTE (SPECIFY) _____	
City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number
City or State	State Registration or ID Number	City or State	State Registration or ID Number
<b>If the list of states and cities is more than six (6), attach a list to this certificate.</b>			
I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax we will pay the tax due direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until cancelled by us in writing or revoked by the city or state.			
General description of products to be purchased from the seller			
Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.			
Authorized Signature (Owner, Partner or Corporate Officer)		Title	
		Date	

### AFFIDAVIT OF SALE PAID BY GOVERNMENT CREDIT CARD

- I affirm that this purchase qualifies for the Colorado sales tax exemption for sales to the United States government, the State of Colorado, its departments and institutions, and its political subdivisions (county and local governments, school districts and special districts); is a government purchase used only in an official governmental capacity; and will be paid directly by a government agency.
- I have checked the applicable boxes below regarding information about payment for this purchase.
- I accept that I remain directly liable for the sales or use tax assessment, and any applicable penalty or interest, if my purchase is found to not qualify for the exemption.
- I understand that the vendor may request this affidavit for every purchase.

Please Print/Type		
Customer Name		Driver License Number (include state)
Agency Name		Colorado Tax ID Number or FEIN
Customer Address		Agency Phone
City	State	ZIP Code
Check All that Apply. For further information visit the Department of Revenue website <a href="http://tax.colorado.com">tax.colorado.com</a>		

- The agency exemption number is printed on the card. The number is 98-\_\_\_\_\_.
- The card states "For Official State Use Only" or "Tax Exempt."
- The card is a Purchasing Card. The federal version has a picture of the U.S. Capitol.
- The card is a Fleet Card and has a picture of cars.
- The card has an 8 digit exemption number below the cardholders name. The number is \_\_\_\_\_.
- The card is an Integrated Card(w/picture of the U.S. flag) or a Travel Card(w/picture of an airplane) AND the sixth digit of the card is 0,6,7,8 or 9.
- The card is a Department of the Interior Mastercard issued by Bank of America w/acct beginning 5568-16.
- The card is not Bureau of Land Management or Nat'l Park Service(Department of the Interior).
- The card is State Department Issued with the name/photo of the bearer and a blue or yellow band across the bottom.

Signature of Customer \_\_\_\_\_

Date \_\_\_\_\_