Name

X

Signature



Name of purchaser, as shown on the sales tax account

## **Louisiana Resale Certificate**

Sales Tax Exemption Certificate for Purchases for Resale R.S. 47:301(10)

Please print or type.

Address			Telephone			
City				State	ZIP	
Purchaser's Type of Business						
Description of purchaser's business acti	vity or items sold:					
the purchaser, certify that all mate ingible personal property, either in the a new product. I further certify that	ne same form as purchased or t	to be added	as a recognizable,	identifial	ble, and benef	
	ems other than for resale, I mus me full liability for the tax.	st pay sales	tax at the time of u	se. If this	s purchase is I	ater found to b
	ne full liability for the tax.	st pay sales	tax at the time of u	ise. If this	s purchase is I	ater found to b
ubject to tax, I, the purchaser, assur	ne full liability for the tax.		tax at the time of u	se. If this	s purchase is I	ater found to b
ubject to tax, I, the purchaser, assur	ne full liability for the tax.		tax at the time of u	se. If this	s purchase is I	ater found to b
understand that if I use any of the It ubject to tax, I, the purchaser, assur  Seller  Address (Street & number or P.O. Box)  City	ne full liability for the tax.		tax at the time of u	State	zip	ater found to b
ubject to tax, I, the purchaser, assur Seller Address (Street & number or P.O. Box)	ne full liability for the tax.		tax at the time of u			ater found to I
ubject to tax, I, the purchaser, assur Seller Address (Street & number or P.O. Box)	ne full liability for the tax.		tax at the time of u			ater found to t
ubject to tax, I, the purchaser, assur Seller Address (Street & number or P.O. Box)	ne full liability for the tax.  Seller Inf	formation	e the taxable items	State for resal	ZIP e is subject to	all the penaltic

Title

Date (mm/dd/yyyy)

**Purchaser Information** 

Sales Tax Account Number (10 digits)