



Cinderella Inc.

cinderellainc.com

Main Office and Warehouse
1215 South Jefferson Avenue
Saginaw, Michigan 48601-2699
989.755.7741 • Fax 989.755.0910

Branch Warehouse
2752 Mullins Avenue NW
Grand Rapids, Michigan 49544
616.791.0060 • Fax 616.791.0057

Dear Customer:

The Sales Tax Division of the State Department of Revenue has advised us that a current certificate of exemption is required from our customers who qualify for Sales Tax Exemption. If you will please complete and sign the certificate shown below that will be our authority to invoice you free of Sales Tax for materials purchased for the reason(s) shown. We appreciate your cooperation in returning this certificate to us by return mail. **If this form is not completed and returned, Michigan law requires us to charge you sales tax.**

Please accept our thanks for your cooperation and for the privilege of being your supplier.

Sincerely,

Cinderella, Inc.

Note: Cinderella is only licensed to collect State of Michigan Taxes at this time. If you are located out of the State of Michigan, please check the Out of State block and sign below. Thank you.

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STATE SALES TAX EXEMPTION CERTIFICATE

The undersigned Purchaser being fully informed concerning Sales Tax Rules and Regulations certifies that he/she/it is legally entitled to exemption from such taxes on the item or items being purchased by reason of one or more of the classifications listed below. (Please check classification and type):

Classification:

- Resale; Industrial Processing;
- Church, Educational, Charitable Institution;
- Federal, State, City County; Out of State; Other _____

Type:

- Blanket Certificate - This certificate shall be considered a part of each future order from CINDERELLA, INC. unless otherwise specified.
- Single purchase certificate - This certificate shall apply only to items purchased on invoice # _____.

In the event that any claimed exemption is disallowed, the undersigned purchaser promises to reimburse the seller for the amount of sales tax involved, including penalties and interest, if any.

Purchaser Claiming Exemption

Sales Tax License Number

Address

State of _____

Date ____/____/____

City, State, Zip

by:
