



waste not paper

410 North Milwaukee Avenue
Chicago, Illinois 60654

company name			
contact name			
shipping address			
city		state	zip
telephone		fax	
email			
billing address			
city		state	zip
telephone		fax	
email			
name			
position		date	
signature			

Please return this form and a copy of your resale certificate or W-9 by fax to 312-264-0378 or by email to sales@wastenotpaper.com.

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Resale Certificate

Business Name: _____

I Hereby Certify:

1. I hold valid seller's permit number: _____

2. I am engaged in the business of selling the following type of tangible personal property:

3. This certificate is for the purchase from **Waste Not Paper** of the item(s) I have listed in paragraph 5 below.

4. I will resell the item(s) listed in paragraph 5 which I am purchasing under this resale certificate in the form of tangible personal property in the regular course of my business operations, and I will do so prior to making any use of the item(s) other than demonstration and display while holding the item(s) for sale in the regular course of my business. I understand that if I use the item(s) purchased under this certificate in any manner other than as just described, I will owe use tax based on each item's purchase price or as otherwise provided by law.

5. Description of property to be purchase for resale: **Envelopes, paper and other stationary products.**

6. I have read and understand the following: For your information: A person may be guilty of a misdemeanor under Revenue and Taxation Code if the purchaser knows at the time of purchase that he or she will not resell the purchased item prior to any use (other than retention, demonstration or display while holding for resale) and he or she furnished a resale certificate to avoid payment to the seller of an amount as tax. Additionally, a person misusing a resale certificate for personal gain or to avoid the payment of tax is liable, for each purchase, for the tax that would have been due, plus a penalty of 10 percent of the tax or \$500, whichever is more.

name of purchaser					
signature of purchaser's employee of authorized representative					
Name of person signing		title		date	
address of purchaser					
city		state		zip	
telephone		email			

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