



Streamlined Sales and Use Tax Agreement
Certificate of Exemption

445 E. Capitol Ave. • Pierre, SD 57501

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale.

The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption.

- 1. [] Check if you are attaching the Multi-State Supplemental form.
[SD] If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.
2. [] Check if this certificate is for a single purchase. Enter the related invoice/purchase order #

3. Please print

Name of purchaser: Company Name, INC.
Business Address: 12345 Name ST. City: City State: SD Zip Code: 12345
Purchaser's Tax ID Number: 123456789 State of Issue: SD Country of Issue: County
If no Tax ID Number, enter one of the following: FEIN: Foreign diplomat number:
Driver's License Number/State Issued ID Number: State of Issue:
Name of seller from whom you are purchasing, leasing or renting: MONOPRICE, INC.
Seller's address: 1 Pointe DR. 4th FL. City: BREA State: CA Zip code: 92821

4. Type of business. Circle the number that describes your business

- 01 [] Accommodation and food services
02 [] Agricultural, forestry, fishing, hunting
03 [] Construction
04 [] Finance and insurance
05 [] Information, publishing and communications
06 [] Manufacturing
07 [] Mining
08 [] Real estate
09 [] Rental and leasing
10 [] Retail trade
11 [] Transportation and warehousing
12 [] Utilities
13 [] Wholesale trade
14 [] Business services
15 [] Professional services
16 [] Education and health-care services
17 [] Nonprofit organization
18 [] Government
19 [] Not a business
20 [] Other (explain)

5. Reason for exemption. Circle the letter that identifies the reason for the exemption.

- A [] Federal government (department)
B [] State or local government (name)
C [] Tribal government (name)
D [] Foreign diplomat #
E [] Charitable organization #
F [] Religious organization # Does Not Apply in S.D.
G [] Resale #
H [] Agricultural production #
I [] Industrial production/manufacturing Does Not Apply in S.D.
J [] Direct pay permit #
K [] Direct mail #
L [] Other (explain)
M [] Educational Organization #

6. Sign here.

I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of Authorized Purchaser: First Last Print Name Here: First Last Title: ENTER Title Date: CURRENT

*MUST Be Actual Signature

Streamlined Sales and Use Tax Agreement

Certificate of Exemption - Multi-state Supplemental

Name of Purchaser

Company Name, Inc.

STATE	Reason for Exemption	Identification Number (If Required)
AR		
GA		
IA		
IN		
KS		
KY		
MI		
MN		
NC		
ND		
NE		
NJ		
NV		
OH		
OK		
RI		
SD	Input a general description	123456789
TN	Related to what we sell.	
UT	EXAMPLE:	
VT	Will be purchasing	
WA	Electronic Accessories / Cables /	
WI	AV Equipment to Resell	
WV		
WY		

SSUTA Direct Mail provisions are not in effect for Tennessee.