

STATEMENT CONCERNING PROPERTY PURCHASED WITHOUT PAYMENT OF CALIFORNIA SALES TAX

DMA _____

Auditor's Initials _____

Please complete this form by providing the requested information. Once completed, please email the completed form to @boe.ca.gov at the Board of Equalization (BOE) within 10 days. In addition, please include the seller's email address in the cc of your email.

NAME OF SELLER FROM WHOM YOU PURCHASED ITEMS WITHOUT SALES TAX				SELLER'S PERMIT NUMBER
DATE	INVOICE NUMBER	PURCHASE ORDER NUMBER	AMOUNT	DESCRIPTION

Please check the appropriate box(es) below. If none of these apply, please explain below.

- The above property was purchased for resale and was resold in the form of tangible personal property. It was not used for any purpose other than retention, demonstration, or display while being held for sale in the regular course of business.
- The above property was purchased for resale and is presently in resale inventory. It has not been used for any purpose other than retention, demonstration, or display while being held for sale in the regular course of business.
- The above property was purchased for leasing and tax measured by rental receipts has been paid directly to the BOE with our sales tax returns.
- The above property was purchased for our own use and not for resale; and
 - tax in the amount of \$ _____ was paid directly to the BOE with our sales tax return for the reporting period
Quarter: _____ Fiscal Year: _____.
 - tax in the amount of \$ _____ was added to the billing and remitted to the Seller.
 - the purchase is a taxable transaction and tax is applicable.

COMMENTS _____

NAME OF BUSINESS	SELLER'S PERMIT NUMBER OF PURCHASER (if applicable)	EMAIL ADDRESS
ADDRESS (street, city, state, zip code)		

NAME OF PURCHASER OR AUTHORIZED REPRESENTATIVE/TITLE	DAYTIME TELEPHONE NUMBER ()	DATE
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The information provided above is subject to verification by the Board of Equalization.