E-595E
Streamlined Sales and Use Tax Agreement
Certificate of Exemption

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 seller may be required to provide this exemption certificate (or data elements required on the form) to a 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. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.

1. ☐ Check if you are attaching the Multistate Supplemental form.
   NC ☐ 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 and enter the related invoice/purchase order # ____________________.

3. Please print
   Name of purchaser
   TIMEPAYMENT CORP
   1600 DISTRICT AVE, SUITE 200
   BURLINGTON, MA 01803
   Purchaser's tax ID number 600482338
   State of issue NC
   Country of issue
   If no tax ID number, enter one of the following:
   FEIN 20-0687813
   Driver's license number
   State issued ID number
   State of issue
   Number
   Foreign diplomatic number
   Name of seller from whom you are purchasing, leasing, or renting

4. Type of business. Check the number that describes your business.
   01 Accommodation and food services
   02 Agricultural, forestry, fishing, and 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. Check the letter that identifies the reason for the exemption.
   ☐ A Federal government (department) ____________________________
   ☐ B State government (name) ____________________________
   ☐ C Tribal government (name) ____________________________
   ☐ D Foreign diplomat # ____________________________
   ☐ G Resale # 600482338 ____________________________
   ☐ H Agricultural production # ____________________________
   ☐ I Industrial production/manufacturing # ____________________________
   ☐ J Direct pay permit # ____________________________
   ☐ K Direct mail # ____________________________
   ☐ L Other (explain) ____________________________

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 ____________________________
   Print name here ____________________________
   Title ____________________________
   Date 1/3/19