

ST-3 (11-11, R-12)

State of New Jersey
DIVISION OF TAXATION

SALES TAX
FORM ST-3

RESALE CERTIFICATE

PURCHASER'S NEW JERSEY
TAXPAYER REGISTRATION NUMBER*

009774470000

The seller must collect the tax on a sale of taxable property or services unless the purchaser gives him a fully completed New Jersey exemption certificate.

To be completed by purchaser and given to and retained by seller. See instructions on back.
Seller should read and comply with the instructions given on both sides of an exemption certificate.

TO _____ Date _____
(Name of Seller)

_____ Address _____ City _____ State _____ Zip _____

The undersigned certifies that:

- (1) He holds a valid Certificate of Authority (number shown above) to collect State of New Jersey Sales and Use Tax.
- (2) He is principally engaged in the sale of (indicate nature of merchandise or service sold):
Leasing General Equipment

- (3) The merchandise or services being herein purchased are described as follows:

- (4) The merchandise described in (3) above is being purchased: (check one or more of the blocks which apply)
 - (a) For resale in its present form.
 - (b) For resale as converted into or as a component part of a product produced by the undersigned.
 - (c) For use in the performance of a taxable service on personal property, where the property which is the subject of this Certificate becomes part of the property being serviced or is later transferred to the purchaser of the service in conjunction with the performance of the service.
- (5) The services described in (3) above are being purchased: (check the block which applies)
 - (a) By a seller who will either collect the tax or will resell the services.
 - (b) To be performed on personal property held for sale.

I, the undersigned purchaser, have read and complied with the instructions and rules promulgated pursuant to the New Jersey Sales and Use Tax Act with respect to the use of the Resale Certificate, and it is my belief that the seller named herein is not required to collect the sales or use tax on the transaction or transactions covered by this Certificate. The undersigned purchaser hereby swears under the penalties for perjury and false swearing that all of the information shown in this Certificate is true.

TimePayment Corp

NAME OF PURCHASER* (as registered with the New Jersey Division of Taxation)

1600 District Avenue, Suite 200, Burlington, MA 01803

(Address of Purchaser)*

Leasing

Type of Business*

By

(Signature of owner, partner, officer of corporation, etc.)*

Director of Tax

(Title)

1/3/19

*Required

MAY BE REPRODUCED
(Front & Back Required)