



Vermont Sales Tax Exemption Certificate
for

**PURCHASES FOR RESALE, BY EXEMPT ORGANIZATIONS, AND
BY DIRECT PAY PERMIT**

32 V.S.A. § 9701(5); § 9743(1)-(3); § 9745

**Form
S-3**

To be filed with the **SELLER**, not with the Vermont Department of Taxes.

Single Purchase - Enter Purchase Price \$ _____
 Multiple Purchase (effective for subsequent purchases.)

BUYER

Buyer's Name	TimePayment Corp		Federal ID Number	20-0687813
Trading as			Telephone Number	617-360-7127
Address	400 Trade Center Suite 6950		State	MA
City	Woburn		ZIP Code	01801
Buyer's Primary Business				

SELLER

Seller's Name		
Address		
City	State	ZIP Code

EXEMPTION CLAIMED

DESCRIPTION. Description of purchased articles
BASIS FOR EXEMPTION
<input checked="" type="checkbox"/> For resale/wholesale Vermont Sales & Use Tax Account Number: <u>SUT-10058778</u>
<input type="checkbox"/> Purchase by 501(c)(3) organization Vermont Account Number: _____
<input type="checkbox"/> Direct payment by federal or Vermont governmental unit
<input type="checkbox"/> Direct Pay Permit Permit #: _____
<input type="checkbox"/> Purchases by 501(c)5 organization presenting fairs, field days, or festivals.... Events: _____ Dates: _____ Vermont Sales & Use Tax Account Number: _____
<input type="checkbox"/> Purchase by volunteer fire department, ambulance company, rescue squad. (Registration is not required.)

SIGNATURE

I certify that I have read and complied with the instructions provided with respect to the use of this Exemption Certificate. I further certify that the above statements are true, complete, and correct, and that no material information has been omitted.

Signature of Buyer or Authorized Agent

Title

Date

CFO

1/1/26