

TAX EXEMPTION CERTIFICATE

Name of Person or Firm Furnishing Services and/or Materials

Date

Address

This is to certify that I am an employee of the State of New York or one of its political subdivisions; that the services or materials purchased on the date set forth below will be paid for by the State or a political subdivision; and that such charges are incurred in the performance of my official duties.

Nature of Transactions

Dates of Transactions

**State Dept., Agency or
Political Subdivision**

Signature of Employee

Title

NOTE: A separate exemption certificate is required from each person claiming exemption.

STATE OF NEW YORK
For use only by Employees of the State of New York
or its political subdivisions.