

TEXAS SALES AND USE TAX PERMIT

This permit is not transf	erable, and this side must be prominently dis	splayed in your place of business.	
Retailers: A seller may NOT accept a copy resale certificate. A certificate is r TAXPAYER NAME, BUSINES COLLEEN REID AND MICHAEL	You must obtain a new permit if there is a change of ownership, location, or business location name. Type of permit SALES AND USE TAX		
HOLY COW EMPORIUM 121 S MECHANIC ST EL CAMPO WHARTON COUNTY	TX 77437-5147	Taxpayer number 3-20769-7945-2 Location number 00001	
NAICS: 453310 Used Merchandise S	E Stores LOWING LOCAL SALES TAX AUTHORITIES: EFF: 12/08/2020 EFF: 12/08/2020	First business date of location 12/08/2020 Glenn Hegar	
A CONTRACTOR OF THE CONTRACTOR		Comptroller of Public Accounts	

You may need to collect sales and/or use tax for other local taxing authorities depending on your type of business.

For additional information, see "Collecting Local Sales and Use Tax" section on the back of this document.

If you have any questions regarding sales tax, visit our website at www.comptroller.texas.gov or call us at 1-800-252-5555.

Detach here and prominently display your permit only. Retain the portion below for your records:

Is the Information Printed on this Permit Correct?

The information printed on your permit is public information. It must be accurate and current. If there is an error, make corrections on the form below. Enter the correct information for incorrect items only. Detach the form and mail it to:

Comptroller of Public Accounts 111 E. 17th Street Austin, TX 78774-0100

More helpful information about your permit is on the back of this document.

Texas Sales and Use Tax Permit Corrections Form

Taxpayer name shown on the permit COLLEEN REID AND MICHAEL REID				eed to make changes to	
Taxpayer number shown on the permit 32076979452	Location numb	Location number shown on the permit 00001		your local sales tax authorities or to the NAICS code printed	
Correct business location name				permit, see information he back of this form.	
Correct business location (no P.O. Box or directions accepte	ed)				
•					
City	State	ZIP code	County	County	
•		2 5545	County		
Correct taxpayer name			Daytime phone (Area co	do and number)	
•			Dayanic phone (7 tea co	de and number j	
Correct mailing address					
•					
City	State	ZIP code	Fodoral Emp	mployer Identification N	
5		2.11 0000	r ederal Litip	ederal Employer Identification Number	
If you are no longer in business , enter the date of y	our last business trans	action.		THE COM	
Sign Taxpayer or authorized agent		Date		E COL	

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