

## Form ST3, Certificate of Exemption

Purchaser: Complete this certificate and give it to the seller.

| r drondserr complete tim   | o certimodice and Bire is to a   |  |  |                    |                  |                           |  |
|--|--|--|--|--------------------|------------------|---------------------------|--|
| This is a blanket certificat   | s not completed, you must of<br>te, unless one of the boxes if<br>if otherwise cancelled by th   | below is chec  |  |                    |                  |                           |  |
| Check if this certific   | ate is for a single purchase ar  | nd enter the re  | elated invoic  | e/nurchase order t | †<br>•           |                           |  |
|  | tor and have a purchasing age  |  |  |                    |                  |                           |  |
| 1 1 -  | exempt entity name and spec  | _  | WILLI GIL CA   | empt organization, | check the box to | make purchases for a spe- |  |
| -  | e  |  | Proje  | ct description     |                  |                           |  |
| Exempt citary name   |  |  | ,  |                    |                  |                           |  |
| Name of Purchaser  |  |  |  |                    |                  |                           |  |
| Thomas Daub  | - TK Hobbyists   | (Daub &  | Daub)  |                    |                  |                           |  |
| Business Address   | and the second s |  | City   |                    | State            | ZIP code                  |  |
| 339 Grand Avenue   |  | Thiensville WI 53092                                   |  |                    |                  | 53092                     |  |
| Purchaser's Tax ID Number  |  | State of Issue   |  |                    |                  |                           |  |
| 456-0000418288-02  |  | Wisconsin  |  |                    |                  |                           |  |
| If no tax ID number, FEIN  |  | Driver's license                                       | Driver's license number/State issued ID number   |                    |                  |                           |  |
| enter one of the following:  |  | State of Issue   | State of Issue Number  |                    |                  |                           |  |
| Name of seller from whom you ar  | re purchasing, leasing, or renting   |  |  |                    |                  |                           |  |
| C-11/- Add   |  |  | C.L.   |                    | State            | ZIP code                  |  |
| Seller's Address   |  |  | City   |                    | State            | Zir Code                  |  |
| Type of Business  01 Accommodation and food services  02 Agricultural, forestry, fishing, hunting  03 Construction  04 Finance and insurance  05 Information, publishing and communications  06 Manufacturing  07 Mining  08 Real estate  09 Rental and leasing  X 10 Retail trade  Reason for Exemption (See Instructions)  A Federal government (department) |  |  | 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 (explain) 20 Other (explain) |                    |                  |                           |  |
| B Specific governme  |  |  | Industrial production  |                    | æ                |                           |  |
| 2 opening 8000000000000000000000000000000000000  |  | L Direct pay authorization                             |  |                    |                  |                           |  |
| C Tribal government  | t (name)   |  |  |                    |                  | ital goods, or computer   |  |
|  | D Foreign diplomat #   |  | software delivered electronically)   |                    |                  |                           |  |
| E Charitable organization #  |  |  | N Direct moil  |                    |                  |                           |  |
| F Educational organ  |  | O Other ( ) to the first to the line                   |  |                    |                  |                           |  |
| G Religious organiza   |  | D. Dansantana annountina                               |  |                    |                  |                           |  |
| X H Resale   |  | Advertising (enter percentage)%                        |  |                    |                  |                           |  |
| I Qualifying capital   | when   | Utilities (enter percentage)%                          |  |                    |                  |                           |  |
| equipment claimed is   |  | Electricity (enter percentage)%                        |  |                    |                  |                           |  |
| l declare that the informat<br>sales tax by using an exem<br>\$100 under Minnesota lav   | tion on this certificate is corre<br>aption certificate for items or<br>v for each transaction for whi   | ect and comple<br>services that w<br>ich the certifice | vill be used j   | for purposes other |                  |                           |  |
| Signature of Authorized Purchase   |  | ame Here   |  | Title              |                  | Date                      |  |
| 1 Damas  | I Tho  | omas R D   | Jaub   | Owne               | r                | September 15,             |  |