

Customer #

**STATE OF DELAWARE
DIVISION OF REVENUE
WHOLESALE EXEMPTION CERTIFICATE**

<i>Name of Seller</i>		Check Applicable Box <input type="checkbox"/> Single Purchase Certificate Invoice No. <input style="width: 80px;" type="text"/> Invoice Date <input style="width: 80px;" type="text"/> <input type="checkbox"/> Blanket Certificate
<i>Address</i>	<i>Zip Code</i>	
<i>Shipping Location</i>	<i>Zip Code</i>	
<i>Date and State of Incorporation</i>	<i>Employer Identification Number</i>	

THE UNDERSIGNED CERTIFIES THAT:

1. The purchaser's employees and vehicles receiving the foods within Delaware are not headquartered – or dispatched from within Delaware; and
2. No portion of the goods received will be inventoried, warehoused, or otherwise come to substantial rest within the State prior to ultimate delivery outside Delaware; and
3. The purchaser has no business facility or goods on consignment or warehoused within Delaware, if this is a blanket certificate.

Name of Purchaser

Address *Zip Code*

Date and State of Incorporation *Employer Identification Number* *Name of Business*

Under penalties or perjury, I declare that I have examined this Certificate, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete.

<i>Date</i>	<i>Signature of Officer or Authorized Individual of the Purchaser</i>	<i>Title</i>
<i>Date</i>	<i>Signature of Officer or Authorized Individual of the Seller</i>	<i>Title</i>