

BLANKET RESALE/EXEMPTION CERTIFICATE

The undersigned vendee hereby certifies that it is a regularly licensed retailer under the Law(s) of the state(s) indicated on the reverse side of this form holding the sales tax license or permit number(s) there enumerated and that all the tangible personal property purchased from:

Alstyle Apparel, Inc.	Alstyle Apparel & Activewear	A&G, Inc.	Ennis, Inc.
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Is exempt from sales and use tax for the following reason: (Check applicable reason below)

NAME _____

RETURN TO: **Alstyle Apparel**
Attn: Customer Service
1501 E. Cerritos Avenue
Anaheim, CA 92805

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CUSTOMER NUMBER

Product that you will purchase: _____

Primary type of business: _____

Check



Resale, in the regular course of business, in the form of tangible personal property.

Incorporating the same, as a material, ingredient or component part, into tangible personal property produced for sale.

Other authorized exemption (described). I am an out of state purchaser who will sell only to purchasers located outside the state of (_____
*Insert State*_____).

This certificate shall be considered a part of each order given by vendee from and after the effective date hereof, unless such order shall otherwise specify.

This certificate shall continue in full force and effect unless and until revoked in writing by the vendee.

The vendee understands and agrees that if it uses any property purchased tax-free under this certificate in any manner which would not exempt the sale from tax, it becomes the user or consumer of such property, and as such assumes liability for and undertakes to pay the tax and interest and penalty thereon, if any.

Dated as of the _____ day of _____, 20 _____

PLEASE INCLUDE YOUR SIGNATURE, TITLE AND RESALE CERTIFICATION NUMBER.

Name of Purchaser (print or type)

Signature of Purchaser or Agent

Address

Title of Authorized Agent

City, State, Zip

State Exempt In (See reverse side if more than one state.)

Resale Certification Number

If you are exempt in more than one state, please fill in the appropriate blank on reverse side.