



MISSOURI DEPARTMENT OF REVENUE
 DIVISION OF TAXATION AND COLLECTION
 P.O. BOX 3300
 JEFFERSON CITY, MISSOURI 65105-3300
SALES/USE TAX EXEMPTION CERTIFICATE

FORM
149
 (REV. 11-2002)

Give this form to your supplier. Do not send this form to the Department of Revenue.

PART A

1. PURCHASER	DOING BUSINESS AS
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ADDRESS	CITY, STATE, AND ZIP
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2. SELLER Arkansas Valley Feathers, Inc.	DOING BUSINESS AS Zucker Feather Products
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ADDRESS PO Box 331, 28419 Hwy 87	CITY, STATE, AND ZIP California MO 65018
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3. PRODUCT OR SERVICES PURCHASED
Feathers/Feather Products

4. PURCHASER'S TYPE OF BUSINESS

5. CLAIMING EXEMPTION FOR

<input type="checkbox"/> RESALE (COMPLETE PART B BELOW)	<input type="checkbox"/> PLANT EXPANSION
<input type="checkbox"/> NEW PLANT	<input type="checkbox"/> REPLACEMENT MACHINERY, EQUIPMENT & PARTS
<input type="checkbox"/> INGREDIENT OR COMPONENT PART	<input type="checkbox"/> WHOLESALERS (TAX ID NOT REQUIRED)
<input type="checkbox"/> AGRICULTURAL	<input type="checkbox"/> COMMON CARRIER
<input type="checkbox"/> OTHER (EXPLAIN) _____	

PART B

IF CLAIMING EXEMPTION FOR RESALE, PLEASE COMPLETE THE FOLLOWING

1. PURCHASER'S HOME STATE	2. PURCHASER'S STATE TAX I.D. NUMBER
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3. GENERAL DESCRIPTION OF PRODUCT TO BE PURCHASED FROM THE SELLER _____

Note: Illinois does not have an exemption on sales of property for subsequent lease or rental.

Caution to Seller: In order for the certificate to be accepted in good faith by the seller, the seller must exercise care that the property being sold is of a type normally sold wholesale, resold, leased, rented, or utilized as an ingredient or component part of a product manufactured by the buyer in the usual course of business. In some states or cities, a seller failing to exercise due care could be held liable for the sales tax due.

Please see reverse side of this form for statutory references.

PART C

I SWEAR OR AFFIRM THE INFORMATION ON THIS FORM IS TRUE AND CORRECT AS TO EVERY MATERIAL MATTER.

AUTHORIZED SIGNATURE (PURCHASER OR PURCHASER'S AGENT)	DATE
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