

**SALES TAX EXEMPT CERTIFICATE
MULTI-JURISDICTION**

Issued to: VISION PICKLING & PROCESSING	Address: 9341 STATE ROUTE 23, WATERMAN, IL 60556
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I certify that:

Name of Firm (Buyer): _____		
Street Address <i>or</i> P. O. Box No.: _____		
City:	State:	Zip Code:

Is engaged as a registered:

- Wholesaler
- Retailer
- Manufacturer
- Lessor
- Other _____

is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, ready ingredients or components of a new product to be resold, leased, or rented in the normal course of our business. We are in the business of wholesaling, related manufacturing, processing, leasing, or renting.

Product <i>or</i> Services Rendered:

State:	State ID No.:	City <i>or</i> State	State Registration <i>or</i> ID No.
City <i>or</i> State	State Registration <i>or</i> ID No.	City <i>or</i> State	State Registration <i>or</i> ID No.
City <i>or</i> State	State Registration <i>or</i> ID No.	City <i>or</i> State	State Registration <i>or</i> ID No.

I further certify that if any property so purchased tax free is used or consumed by the firm as to make it subject to a Sales or Use Tax we will pay the tax direct to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be part of each order which we may hereafter give to you, unless otherwise, specified, and shall be valid until canceled by us in writing or revoked by the city or state.

General description of products to be purchased from the seller:
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I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature (Owner, Partner, or Corporate Officer)	Title	Date
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