## State of Alissouri LIMITED EXEMPTION FROM MISSOURI SALES AND USE TAX ON PURCHASES (State Agency)

Issued To:
MISSOURI DEPT OF TRANSPORATION
105 W CAPITOL AVE
JEFFERSON CITY MO 65101

Missouri Tax ID: 12561631

Effective Date: 07/11/2002

Your application for sales/use tax exempt status has been approved pursuant to Section 144,030.1, RSMo. This letter is issued as documentation of your Agency's exempt status. The agency above must adhere to the exempt status requirements/

This is a continuing exemption subject to legislative changes and review by the Director of Revenue. Outlined below are specific requirements regarding this exemption. This summary is not intended as a complete restatement of the law. You should review the law to ensure your understanding and compliance

- This exemption is not assignable or transferable. It is an exemption from sales and use taxes only and is not an exemption from real or personal property tax.
- Purchases by your agency are not subject to sales or use tax if within the
  conduct of your agency's exempt functions and activities. When purchasing with
  this exemption, furnish all sellers or vendors a copy of this letter.
- Individuals making personal purchases may not use this exemption.
- A contractor may purchase and pay for construction materials exempt from sales tax when fulfilling a contract with your organization only if your organization issues a project exemption certificate and the contractor makes purchases in compliance with the provisions of section 144,062, RSMo.
- Sales by your agency are subject to all applicable state and local sales taxes. If
  you engage in the business of selling tangible personal property or taxable
  services at retail, you must obtain a Missouri Retail Sales Tax License and
  collect and remit sales tax.
- Any alteration to this exemption letter renders it invalid.

If you have any questions regarding the use of this letter, please contact the Taxation Bureau, P.O. Box 358, Jefferson City, MO 65105-0358, email us at <a href="mailto:salesuse@dor.mo.gov">salesuse@dor.mo.gov</a> or by telephone 573-751-2836.



## MISSOURI DEPARTMENT OF REVENUE

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FORM 5060

## TO BE GIVEN TO YOUR CONTRACTOR

| PROJECT EXEMPTION CERT   | IFICALE                             | (REV                | • 4-2       | 2008)           | ŀ             |                   |                |                      |               |                  |        |  |
|--|-------------------------------------|---------------------|-------------|-----------------|---------------|-------------------|----------------|----------------------|---------------|------------------|--------|--|
| NAME OF EXEMPT ENTITY ISSUING THE CERTIFICATE  |                                     |                     | MIS         | SOURI           | TAX E         | XEMPT             | TION N         | UMBER                |               |                  |        |  |
| Missouri Department of Transportation  |                                     |                     | _1          | _2              | _5_           | 6_                | 1              | 6 3                  | _1_           |                  |        |  |
| ADDRESS  | CITY                                |                     |             |                 |               |                   |                | STATE                | ZIP           |                  |        |  |
| P.O. Box 270 - 105 West Capitol  |                                     | Jefferson City      |             |                 |               |                   |                | МО                   | 6             | 5 1              | 0 2    |  |
| REGIN DATE FOR PROJECT PROJECTED COMPLETION I  |                                     |                     | DATE PROJ   |                 |               |                   |                | JECT NUM             |               |                  |        |  |
| 0 4 / 0 7 / 2 0 1 4  | 0 2/3 0/2 0 1 6 J4I2353, J4I2374, J |                     |             |                 |               |                   |                | מזאו ו               | റാററ          |                  |        |  |
| DESCRIPTION OF PROJECT   | 0 2/5 0                             | / 2_ 0_ 1           |             |                 |               |                   | J412           | 2333, 14             | 123/          | t, J413          | UZUC   |  |
| Job J4I2353 Route 635 PLATTE County. UBAWS the total length of improvement being 3.245 mil from Route 9 to Route D near Kansas City, the t Route IS 635 PLATTE County. Drainage Improve improvement being 0.616 miles.   | es.****(2): J<br>otal length of     | ob J4I23<br>improve | 74 F<br>mer | Route<br>nt bei | 29 F<br>ng 9. | LATT<br>39 m      | E Co<br>iles.* | unty. Br<br>'***(3); | idge<br>Job . | Rehabi<br>141302 | 0C     |  |
| PROJECT LOCATION   |                                     |                     | EXP         | IRATIC          | ON DAT        | Έ                 |                |                      |               |                  |        |  |
| Rts 635, 29, IS 635 - Platte County  |                                     |                     | 0           | 2/3             | 0/            | <u>2</u> <u>0</u> | _1_            | 6                    |               |                  |        |  |
| THIS EXEMPTION DOES NOT APPLY TO THE PU CONTRACTOR OR SUB-CONTRACTOR.  | IRCHASE OR                          | RENTAL              | OF          | MAC             | HINE          | RY, E             | QUIP           | MENT, O              | OR TO         | OLS              | 3Y THI |  |
| Give a signed copy of this certificate, along with a and/or subcontractor who will be purchasing tan ensure the validity of the certificate. You must iss  | gible persona                       | l propert           | y foi       | r use           | in th         | is pro            | oject.         | It is yo             |               |                  |        |  |
| EXEMPT ENTITY'S AUTHORIZED SIGNATURE   | -                                   |                     |             |                 |               |                   |                | DATE                 |               |                  |        |  |
| Cric ES On   | weler                               |                     |             |                 |               |                   |                | 0 1/2                | 4/            | 2 0              | 1 4    |  |
| The Missouri exempt entity named above hereby authorated or consumed in the construction project ider under penalties of perjury that I employ no illegal or untax exemption, credit or abatement if I employ such al  | ntified herein a<br>nauthorized ali | ind no oth          | er, p       | oursu           | ant to        | Secti             | ion 14         | 44.062, F            | RSMo.         | lalso            | declar |  |
| NAME OF PURCHASING CONTRACTOR  |                                     |                     |             |                 |               |                   |                |                      |               |                  |        |  |
| Comanche Construction Inc.   |                                     | OITV                |             |                 |               |                   | Т              | OTATE                |               | ZID              |        |  |
|  |                                     | CITY                |             |                 |               |                   |                | STATE                |               | ZIP              | 0.6    |  |
| 16510 W 119th Street   | Allawia 2002                        | Olat                |             |                 | 2225          |                   | ,              | KS                   |               |                  | 0 6 :  |  |
| Contractors present this to your support of the contractors present this to your support of the contractor of the contra |                                     |                     |             |                 |               |                   |                |                      |               |                  |        |  |
| ADDRESS  |                                     | CITY                |             |                 |               |                   |                | STATE                |               | ZIP              |        |  |
| SIGNATURE OF CONTRACTOR  |                                     |                     |             |                 |               |                   | $\dashv$       | DATE                 |               |                  |        |  |
|  |                                     |                     |             |                 |               |                   |                | 3,,                  | 0             | 20               | 14     |  |