

**State of Missouri**  
**LIMITED EXEMPTION**  
**FROM MISSOURI SALES AND USE TAX ON PURCHASES**  
**(State Agency)**

Issued To:  
MISSOURI DEPT OF TRANSPORTATION  
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 [salesuse@dor.mo.gov](mailto:salesuse@dor.mo.gov) or by telephone 573-751-2836.



MISSOURI DEPARTMENT OF REVENUE  
 ..... DIVISION .....  
**PROJECT EXEMPTION CERTIFICATE**

FORM  
**5060**  
 (REV. • 1-2008)

**TO BE GIVEN TO  
 YOUR CONTRACTOR**

|   |                            |                               |                  |
|---|----------------------------|-------------------------------|------------------|
| NAME OF EXEMPT ENTITY ISSUING THE CERTIFICATE   |                            | MISSOURI TAX EXEMPTION NUMBER |                  |
| Missouri Department of Transportation   |                            | <u>1 2 5 6 1 6 3 1</u>        |                  |
| ADDRESS   | CITY                       | STATE                         | ZIP              |
| P.O. Box 270 - 105 West Capitol   | Jefferson City             | MO                            | <u>6 5 1 0 2</u> |
| BEGIN DATE FOR PROJECT  | PROJECTED COMPLETION DATE  | PROJECT NUMBER                |                  |
| <u>0 4 / 0 7 / 2 0 1 4</u>  | <u>0 9 / 1 7 / 2 0 1 6</u> | J4P2191, J4P2191B, J4S3055    |                  |
| DESCRIPTION OF PROJECT  |                            |                               |                  |
| Job J4P2191 Route Var JACKSON County. Bridge rehabilitation various bridges throughout Jackson County, the total length of improvement being 0 miles.****(2); Job J4P2191B Route Var VARIOUS County. Bridge rehabilitation various bridges in Cass and Jackson Counties, the total length of improvement being 0 miles.****(3); Job J4S3055 Route 49 JACKSON County. ADA & signal improvements over route 71 near Grandview, the total length of improvement being 0.146 miles. |                            |                               |                  |
| PROJECT LOCATION  |                            | EXPIRATION DATE               |                  |
| Rts. Various, 47, Jackson & Cass Counties   |                            | <u>0 9 / 1 7 / 2 0 1 6</u>    |                  |
| <b>THIS EXEMPTION DOES NOT APPLY TO THE PURCHASE OR RENTAL OF MACHINERY, EQUIPMENT, OR TOOLS BY THE CONTRACTOR OR SUB-CONTRACTOR.</b>   |                            |                               |                  |
| Give a signed copy of this certificate, along with a copy of your Missouri Sales/Use Tax Exemption Letter to each contractor and/or subcontractor who will be purchasing tangible personal property for use in this project. It is your responsibility to ensure the validity of the certificate. You must issue a new certificate if any of the information changes.   |                            |                               |                  |
| EXEMPT ENTITY'S AUTHORIZED SIGNATURE  |                            | DATE                          |                  |
| <i>Eric E. Sweter</i>   |                            | <u>0 2 / 2 1 / 2 0 1 4</u>    |                  |
| The Missouri exempt entity named above hereby authorizes the purchase, without sales tax, of tangible personal property to be incorporated or consumed in the construction project identified herein and no other, pursuant to Section 144.062, RSMo. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens.     |                            |                               |                  |
| NAME OF PURCHASING CONTRACTOR   |                            |                               |                  |
| Comanche Construction Inc.  |                            |                               |                  |
| ADDRESS   | CITY                       | STATE                         | ZIP              |
| 16510 W 119th Street  | Olathe                     | KS                            | <u>6 6 0 6 1</u> |
| <b>Contractors present this to your supplier in order to purchase the necessary materials tax exempt.</b>   |                            |                               |                  |
| <b>NOTE: COMPLETE AND SIGN BOTTOM PORTION IF EXTENDING CERTIFICATE TO YOUR SUBCONTRACTOR.</b>   |                            |                               |                  |
| NAME OF PURCHASING SUBCONTRACTOR  |                            |                               |                  |
|   |                            |                               |                  |
| ADDRESS   | CITY                       | STATE                         | ZIP              |
|   |                            |                               |                  |
| SIGNATURE OF CONTRACTOR   |                            | DATE                          |                  |
| <i>[Signature]</i>  |                            | <u>9.17.2015</u>              |                  |