



945 WEST HYDE PARK BLVD., INGLEWOOD, CA 90302
TEL 310-672-9090 FAX 310-672-6004

Sales Rep _____

RESALE CERTIFICATE

Attention Credit Department

(Name of Purchaser)

(Address of Purchaser)

I HEREBY CERTIFY: That I hold valid seller's permit

No.: _____ issued pursuant to the Sales and Use Tax Law; that
I am engaged in the business of selling:

Equipment & Expendable Supplies

that the tangible personal property described herein which I shall purchase from:

International Supplies

will be resold by me in the form of tangible personal property; however, that in the event any of such property is used for any purpose other than retention, demonstration, or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property. Description of property to be purchased:

Equipment & Expendable Supplies

Date: _____ 20 _____

(Printed name of Purchaser or Authorized Agent, and Title)

Phone: () _____

(Signature of Purchaser or Authorized Agent)

***** A COPY OF YOUR SELLER PERMIT MUST BE ATTACHED*****

FORM # 120A/ 01/15