

**UNIFORM SALES & USE TAX CERTIFICATE  
MULTIJURISDICTION**

Issued to Seller: HILL'S PET NUTRITION, INC. AND SUBSIDIARIES

Address: 400 SW 8th Street, PO Box 148

Topeka, Kansas 66601

I certify that \_\_\_\_\_ is engaged as a registered

Name of Firm (Buyer): \_\_\_\_\_ Wholesaler \_\_\_\_\_

Address: \_\_\_\_\_ Retailer \_\_\_\_\_

\_\_\_\_\_ Manufacturer \_\_\_\_\_

\_\_\_\_\_ Lessor (See notes \_\_\_\_\_

\_\_\_\_\_ on reverse side) \_\_\_\_\_

\_\_\_\_\_ Other (Specify) \_\_\_\_\_

and 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, resale, ingredients or components of a new product to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: \_\_\_\_\_

General description of products to be purchased from the seller: Pet Food Products

| State <sup>1</sup> | State Registration, Sellers Permit<br>or ID No. of Purchaser |
|--------------------|--|
| AL <sup>2</sup>    | _____  |
| AR                 | _____  |
| AZ <sup>22</sup>   | _____  |
| CA <sup>3</sup>    | _____  |
| CO                 | _____  |
| CT <sup>4</sup>    | _____  |
| DC                 | _____  |
| FL <sup>23</sup>   | _____  |
| GA <sup>6</sup>    | _____  |
| HI <sup>1,7</sup>  | _____  |
| ID                 | _____  |
| IL <sup>1,8</sup>  | _____  |
| IA                 | _____  |
| KS                 | _____  |
| KY <sup>24</sup>   | _____  |
| ME <sup>5</sup>    | _____  |
| MD <sup>10</sup>   | _____  |
| MI <sup>11</sup>   | _____  |
| MN <sup>12</sup>   | _____  |

| State <sup>1</sup>                | State Registration, Sellers Permit<br>or ID No. of Purchaser |
|-----------------------------------|--|
| MO <sup>10</sup>                  | _____  |
| NC <sup>25</sup>                  | _____  |
| NE <sup>14</sup>                  | _____  |
| NJ                                | _____  |
| NV                                | _____  |
| NM <sup>1,1</sup><br><sub>5</sub> | _____  |
| ND                                | _____  |
| OH <sup>26</sup>                  | _____  |
| OK <sup>16</sup>                  | _____  |
| PA <sup>27</sup><br><sub>17</sub> | _____  |
| RI                                | _____  |
| SC                                | _____  |
| SD <sup>18</sup>                  | _____  |
| TN <sup>19</sup>                  | _____  |
| TX                                | _____  |
| UT                                | _____  |
| VT                                | _____  |
| WA <sup>20</sup><br><sub>21</sub> | _____  |
| WI                                | _____  |

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 due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a 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.

Under penalties of perjury, 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: \_\_\_\_\_