

REV-1715 AS (10-05)

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF REVENUE  
BUREAU OF BUSINESS TRUST FUND TAXES  
PO BOX 280901  
HARRISBURG, PA 17128-0901



**EXEMPT ORGANIZATION  
DECLARATION OF  
SALES TAX EXEMPTION**

THIS FORM MAY BE PHOTOCOPIED

**INSTRUCTIONS:**

Vendors may use this declaration to document purchases of tax free items by tax exempt organizations (charitable, religious and educational organizations and volunteer fire or ambulance companies) holding a valid exemption number issued by the Department of Revenue where the purchase is \$200 or more. The vendor may require the Customer's Declaration (below) for each such transaction to demonstrate that the vendor made the tax exempt sale "in good faith."

Complete each declaration in its entirety. Use a separate declaration for each transaction of \$200 or more. Accompany the declaration with an invoice and a properly completed Exemption Certificate (REV-1220), and maintain these documents for three years.

**CUSTOMER'S DECLARATION**

As an authorized representative of a tax-exempt organization, I declare that the property and/or services purchased or leased in the name of the exempt organization set forth below, as described on the attached invoice, are being purchased for an exempt use under Pennsylvania Sales Tax law.

*Robert A. Lanni*

Authorized Signature

ROBERT RAUCCI, AVP, FINANCIAL SVCS (215) 503-1530  
Print Name/Title Phone No.

THOMAS JEFFERSON UNIVERSITY HOSPITAL 75-495-797  
Name of Exempt Organization Sales Tax Exemption No.  
(Must have a 75-prefix)

**VENDOR'S DECLARATION**

I understand that this completed declaration must be kept in my records for three years from the purchase date. I understand that failure to provide the declaration to Revenue auditors could result in my liability for Sales Tax if the transaction is subsequently determined to be taxable.

Attached is Invoice No. \_\_\_\_\_ dated \_\_\_\_\_  
covering this exempt transaction.

\_\_\_\_\_  
Vendor's Signature