

# CERTIFICATE OF EXEMPTION FROM FEDERAL EXCISE TAX

\_\_\_\_\_  
Year of Tax  
Exemption

Telephone Number(s) \_\_\_\_\_

The undersigned hereby certifies that he/she is the \_\_\_\_\_  
(Title)

of: \_\_\_\_\_  
(Name of Organization)

That he/she is authorized to execute this certificate; and hereby represents that the telecommunications services furnished or to be furnished the organization by

Southwest Arkansas Telephone Cooperative., Inc. are exempt from federal excise tax for the reason marked below:

- \_\_\_\_\_ Nonprofit Hospital
- \_\_\_\_\_ International Organization Designated by The President
- \_\_\_\_\_ Foreign Diplomat
- \_\_\_\_\_ American Red Cross
- \_\_\_\_\_ Federal, State or Local Government
- \_\_\_\_\_ Nonprofit Educational Organization
- \_\_\_\_\_ Local Congressional Office
- \_\_\_\_\_ Are you exempt from Federal Income Tax \_\_\_\_ Yes \_\_\_\_ No

Receipt of written notification of change of exemption status is required by the telephone company within thirty (30) days of the change. The exemption was or will be no longer entitled as of \_\_\_\_\_. In the case of a contested exemption the customer will be required to secure an approval of exemption for the Federal Government.

**The undersigned understands that the fraudulent use of this certificate for the purpose of securing this exemption will subject him/her and all guilty parties to a fine of not more than \$10,000 or to imprisonment for not more than five years, or both, together with the costs of prosecution. The undersigned agrees to reimburse the telephone company for any tax penalty or interest which the telephone company incurs by relying on an incorrect exemption certificate.**

\_\_\_\_\_  
Signature of Authorized Individual

\_\_\_\_\_  
Date of Signing

\_\_\_\_\_  
Address

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## FOR TELEPHONE COMPANY USE

Received by \_\_\_\_\_ Date \_\_\_\_\_  
Remarks \_\_\_\_\_

Exemption Approved by \_\_\_\_\_ Date \_\_\_\_\_  
Business Office Location 2601 East Street, Texarkana, AR 71854-8073