

12-302
(Rev. 10-86/4)

HOTEL OCCUPANCY TAX EXEMPTION CERTIFICATE

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| Name of guest |
| Address of guest <i>(Street and number, city, state, ZIP code)</i> |
| Name of exempt organization |
| Address of exempt organization <i>(Street and number, city, state, ZIP code)</i> |
| Organization exempt status <i>(Religious, charitable, educational, governmental)</i> |

GUEST CERTIFICATION:

I declare that I am an occupant of this hotel/motel on official business sanctioned by the exempt organization named above, and that all information shown on this document is true and correct.

| | | |
|--------------|-------|------|
| sign here | Guest | Date |
|--------------|-------|------|

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|--|
| Name of hotel/motel |
| Address of hotel/motel <i>(Street and number, city, state, ZIP code)</i> |
| Method of payment <i>(Cash, personal check or credit card, organization check or credit card, direct billing, other)</i> |

NOTE: This certificate should be furnished to the Hotel or Motel. DO NOT send the completed certificate to the Comptroller of Public Accounts. This certificate does not require a number to be valid.