Vermont Sales Tax Exemption Certificate
for

PURCHASES FOR RESALE, BY EXEMPT ORGANIZATIONS, AND BY DIRECT PAY PERMIT

32 V.S.A. § 9701(5); § 9743(1)-(3); § 9745

Form S-3

To be filed with the ***SELLER***, not with the Vermont Department of Taxes.

☐ Single Purchase - Enter Purchase Price $ _____

☑ Multiple Purchase (effective for subsequent purchases.)

BUYER

Buyer's Name: Champlain College Inc		Federal ID Number: 03-0220266
Trading as:		Telephone Number: 802-860-2700
Address: 163 South Willard Street, PO Box 670		
City: Burlington	State: VT	ZIP Code: 05402-0670
Buyer's Primary Business: Education		

SELLER

Seller's Name:		
Address:		
City:	State:	ZIP Code:

EXEMPTION CLAIMED

DESCRIPTION. Description of purchased articles

Items purchased for education use

BASIS FOR EXEMPTION

- ☐ For resale/wholesale . . . . . Vermont Sales & Use Tax Account Number: _____
- ☑ Purchase by 501(c)(3) organization . . . . . Vermont Account Number: SUT 10033750
- ☐ Direct payment by federal or Vermont governmental unit
- ☐ Direct Pay Permit . . . . . Permit #: _____
- ☐ Purchases by 501(c)5 organization presenting fairs, field days, or festivals. . . . Events: _____
  . . . . . Dates: _____
  . . . . . Vermont Sales & Use Tax Account Number: _____
- ☐ Purchase by volunteer fire department, ambulance company, rescue squad. (Registration is not required.)

SIGNATURE

I certify that I have read and complied with the instructions provided with respect to the use of this Exemption Certificate. I further certify that the above statements are true, complete, and correct, and that no material information has been omitted.

Signature of Buyer or Authorized Agent	Title	Date
	Senior Director of Finance, Assistant Treasurer	1/8/2026

This form may be photocopied.