EXEMPT ORGANIZATION'S ATTESTATION OF DIRECT BILLING

STATE OF FLORIDA

I, the undersigned, am a representative of the exempt governmental or nonprofit organization identified below. The purchase or lease of tangible personal property and/or services or the rental of living accommodations made on the dates listed below is for use by and directly paid by the exempt organization identified below.

The charges for purchase or lease of tangible personal property, banquets, services, or the rental of living accommodations from _____/_____/_____ to _____/_____/_____ will be billed to and paid directly by the exempt organization.

If the charges for purchase or lease of tangible personal property, services, or the rental of living accommodations are paid by credit card, I attest that the credit card used is issued directly by the exempt organization identified below, in the name of the exempt organization identified below, with the bill directly paid by the funds of the organization.

Under penalty of perjury, I declare that I have read the foregoing and that the facts stated in it are true.

Authorized signature on behalf of the exempt entity:_____ Date:_____

Please print name & title of the representative:_____

Name of exempt entity:_____

Type of exempt entity: _____

Exempt Entity Consumer's Certificate of Exemption No (Form DR-14): _____

Exempt Entity Consumer's Certificate of Exemption (Form DR-14) Expiration date: _____

Address of exempt entity:_____

Phone number of exempt entity:_____

Email contact of exempt entity:_____

IMPORTANT NOTE: THIS LETTER MAY NOT BE USED TO SUBSTANTIATE PURCHASES OR LEASES OF TANGIBLE PERSONAL PROPERTY, SERVICES, OR LIVING ACCOMMODATIONS FOR THE PERSONAL USE OF, OR INDIVIDUALLY BILLED TO, ANY INDIVIDUAL REPRESENTING THE EXEMPT ENTITY ABOVE. IF THE PURCHASE IS MADE WITH A CREDIT CARD BILLED TO THE EMPLOYEE AND LATER REIMBURSED THE PURCHASE DOES NOT QUALIFY FOR EXEMPTION

Name of Hotel: Hilton Tampa Dowtown

Address of Hotel: 211 N Tampa Str Tampa, FL 33602