

# Varner's GREENHOUSE & NURSERY

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July 20, 2021

Dear Fundraiser:

It is time to start planning your 2021 Mum Fundraiser at Varner's!

The Fundraiser prices are only available to non-profit organizations and businesses providing valid documentation for our files. The proper state sales tax exemption forms are also attached, if needed.

The way the program works is we provide you with a set discounted price and you to decide the amount of profit you would like to make on each Mum Pot and set your price accordingly.

Please submit your order on the enclosed order form. You can choose between the spreadsheet order forms that will automatically calculate the quantities you enter, or you can print the PDF document and complete it manually. You can submit your order to us by email using the [orders@varnersgreenhouse.com](mailto:orders@varnersgreenhouse.com) email address, or via fax to 269-684-4924, or U.S. mail to the address above, or in person at the same address.

Varner's does offer a delivery service option for those who order 100 or more Mum Pots. All deliveries have a delivery fee based on distance traveled and the number of truck loads required, starting at \$40.00 for our immediate area. Please feel free to contact us for a quote or with any questions.

To ensure a successful fundraising event, please follow these procedures:

1. Call in ASAP to set your delivery date. These fill up quickly. No deliveries on Sundays or Labor Day.
2. Sell, Sell, Sell!
3. Return the 2021 Mum Pot Fundraiser Price List and Order Form seven (7) days prior to the delivery date.
4. Delivery day. An invoice will be given to you at the time of delivery. If you have not established terms with us, payment will be expected at the time of delivery. For those who have established terms with us the invoice you will receive at delivery will be the only invoice we provide and from which you should use to pay. No other invoice will be mailed.

As we get later into the season, we cannot always guarantee our Varner's Grown mums will be available in all colors, and substitutions may be necessary. We will do our absolute best to supply you with what you have ordered. If we cannot, we will contact you to let you know what options are available to you. There can be no guarantee as to the shade of color (i.e., pink is pink, not light pink or dark pink).

Thank you for selecting Varner's to partner with you for your fundraising event. We greatly value our relationship with you. If you have any questions, please feel free to contact us at the above email address or call 269-684-3530. Again, thanks for your business.

Kind regards,

*Mary Varner*

Mary Varner, Owner

**Form ST-105**State Form 49065  
(R5 / 6-17)Indiana Department of Revenue  
**General Sales Tax Exemption Certificate**

Indiana registered retail merchants and businesses located outside Indiana may use this certificate. The claimed exemption must be allowed by Indiana code. Exemption statutes of other states are not valid for purchases from Indiana vendors. **This exemption certificate can not be issued for the purchase of Utilities, Vehicles, Watercraft, or Aircraft.** Purchaser must be registered with the Department of Revenue or the appropriate taxing authority of the purchaser's state of residence.

**Sales tax must be charged unless all information in each section is fully completed by the purchaser.** Purchasers not able to provide all required information must pay the tax and may file a claim for refund (Form GA-110L) directly with the Department of Revenue. A valid certificate also serves as an exemption certificate for (1) county innkeeper's tax and (2) local food and beverage tax.

Section 1 (print only)	Name of Purchaser: _____
	Business Address: _____ City: _____ State: _____ ZIP Code: _____
	Purchaser must provide minimum of one ID number below.*
	Provide your Indiana Registered Retail Merchant's Certificate TID and LOC Number as shown on your Certificate.
	TID Number (10 digits): _____ - LOC Number (3 digits): _____
	If not registered with the Indiana DOR, provide your State Tax ID Number from another State
	<b>*See instructions on the reverse side if you do not have either number.</b>
	State ID Number: _____ State of Issue: _____

Section 2	Is this a <input type="checkbox"/> blanket purchase exemption request or a <input type="checkbox"/> single purchase exemption request? (check one)
	Description of items to be purchased: _____

Section 3	Purchaser must indicate the type of exemption being claimed for this purchase. (check one or explain)
	<input type="checkbox"/> Sales to a retailer, wholesaler, or manufacturer for <b>resale</b> only.
	<input type="checkbox"/> Sale of manufacturing machinery, tools, and equipment to be used directly in direct <b>production</b> .
	<input type="checkbox"/> Sales to <b>nonprofit organizations</b> claiming exemption pursuant to Sales Tax Information Bulletin #10. (May not be used for personal hotel rooms and meals.)
	<input type="checkbox"/> Sales of tangible personal property predominately used (greater than 50 percent) in providing <b>public transportation</b> - provide USDOT Number. A person or corporation who is hauling under someone else's motor carrier authority, or has a contract as a <b>school bus operator</b> , must provide their SSN or FID Number in lieu of a State ID Number in Section 1.
	USDOT Number: _____
	<input type="checkbox"/> Sales to persons, occupationally engaged as farmers, to be used directly in production of <b>agricultural</b> products for sale. <b>Note:</b> A farmer not possessing a State Business License Number may enter a FID Number or a SSN in lieu of a State ID Number in Section 1.
	<input type="checkbox"/> Sales to a <b>contractor</b> for exempt projects (such as public schools, government, or nonprofits).
	<input type="checkbox"/> Sales to <b>Indiana Governmental Units</b> (agencies, cities, towns, municipalities, public schools, and state universities).
	<input type="checkbox"/> Sales to the <b>United States Federal Government</b> - show agency name. _____
	<b>Note:</b> A U.S. Government agency should enter its Federal Identification Number (FID) in Section 1 in lieu of a State ID Number.
	<input type="checkbox"/> Other - explain. _____

Section 4	I hereby certify under the penalties of perjury that the property purchased by the use of this exemption certificate is to be used for an exempt purpose pursuant to the State Gross Retail Sales Tax Act, Indiana Code 6-2.5, and the item purchased is not a utility, vehicle, watercraft, or aircraft.
	I confirm my understanding that misuse, ( <i>either negligent or intentional</i> ), and/or fraudulent use of this certificate may subject both me personally and/or the business entity I represent to the imposition of tax, interest, and civil and/or criminal penalties.
	Signature of Purchaser: _____ Date: _____
	Printed Name: _____ Title: _____

The Indiana Department of Revenue may request verification of registration in another state if you are an out-of-state purchaser.  
**Seller must keep this certificate on file to support exempt sales.**



## Instructions for Completing Form ST-105

All four sections of the ST-105 must be completed or the exemption is not valid and the seller is responsible for the collection of the Indiana sales tax.

### Section 1

- A) This section requires an identification number.** In most cases this number will be an Indiana Department of Revenue issued Taxpayer Identification Number (TID - see note below) used for Indiana sales and/or withholding tax reporting. If the purchaser is from another state and does not possess an Indiana TID Number, a resident state's business license, or State issued ID Number must be provided.
- B) Exceptions** - For a purchaser not possessing either an Indiana TID Number or another State ID Number, the following may be used in lieu of this requirement.
- Federal Government** – place your FID Number in the State ID Number space.
- Farmer** – place your SSN or FID Number in the State ID Number space.
- Public transportation haulers** operating under another motor carrier authority, or with a contract as a school bus operator, must indicate their SSN or FID Number in the State ID Number space.
- Nonprofit Organization** – must show its FID Number in the State ID Number space.

### Section 2

- A) Check a box to indicate if this is a single purchase or blanket exemption.
- B) Describe product being purchased.

### Section 3

- A) Purchaser must check the reason for exemption.
- B) Purchaser must be able to provide additional information if requested.

### Section 4

- A) Purchaser must sign and date the form.
- B) Printed name and title of signer must be shown.

**Note:** The Indiana Taxpayer Identification Number (TID) is a ten digit number followed by a three digit LOC Number. The TID is also known as the following:

- a) Registered Retail Merchant Certificate
- b) Tax Exempt Identification Number
- c) Sales Tax Identification Number
- d) Withholding Tax Identification Number

The Registered Retail Merchant Certificate issued by the Indiana Department of Revenue shows the TID (10 digits) and the LOC (3 digits) at the top right of the certificate.

## Michigan Sales and Use Tax Certificate of Exemption

**INSTRUCTIONS: DO NOT send to the Department of Treasury. Certificate must be retained in the seller's records.** This certificate is invalid unless all four sections are completed by the purchaser.

### SECTION 1: TYPE OF PURCHASE

☐ A. One-Time Purchase

Order or Invoice Number: \_\_\_\_\_

☐ C. Blanket Certificate

Expiration Date (maximum of four years): \_\_\_\_\_

☐ B. Blanket Certificate. Recurring Business Relationship

The purchaser hereby claims exemption on the purchase of tangible personal property and selected services made from the vendor listed below. This certifies that this claim is based upon the purchaser's proposed use of the items or services, OR the status of the purchaser.

Vendor's Name and Address

### SECTION 2: ITEMS COVERED BY THIS CERTIFICATE

Check one of the following:

1. ☐ All items purchased.

2. ☐ Limited to the following items: \_\_\_\_\_

### SECTION 3: BASIS FOR EXEMPTION CLAIM

Check one of the following:

1. ☐ For Lease. Enter Use Tax Registration Number: \_\_\_\_\_

2. ☐ For Resale at Retail. Enter Sales Tax License Number: \_\_\_\_\_

The following exemptions DO NOT require the purchaser to provide a number:

3. ☐ Agricultural Production. Enter percentage: \_\_\_\_\_%

4. ☐ Church, Government Entity, Nonprofit School, or Nonprofit Hospital (Circle type of organization).

5. ☐ Contractor (must provide *Michigan Sales and Use Tax Contractor Eligibility Statement* (Form 3520)).

6. ☐ For Resale at Wholesale.

7. ☐ Industrial Processing. Enter percentage: \_\_\_\_\_%

8. ☐ Nonprofit Internal Revenue Code Section 501(c)(3) or 501(c)(4) Exempt Organization.

9. ☐ Nonprofit Organization with an authorized letter issued by the Michigan Department of Treasury prior to June 1994.

10. ☐ Rolling Stock purchased by an Interstate Motor Carrier.

11. ☐ Qualified Data Center

12. ☐ Direct Pay - Authorized to pay use tax on qualified transactions directly to the State of Michigan under Account Number \_\_\_\_\_.

13. ☐ Other (explain): \_\_\_\_\_

### SECTION 4: CERTIFICATION

*I declare, under penalty of perjury, that the information on this certificate is true, that I have consulted the statutes, administrative rules and other sources of law applicable to my exemption, and that I have exercised reasonable care in assuring that my claim of exemption is valid under Michigan law. In the event this claim is disallowed, I accept full responsibility for the payment of tax, penalty and any accrued interest, including, if necessary, reimbursement to the vendor for tax and accrued interest.*

Business Name		Type of Business (see codes on page 2)
Business Address		City, State, ZIP Code
Business Telephone Number (include area code)		Name (Print or Type)
Signature and Title		Date Signed

## Instructions for completing *Michigan Sales and Use Tax Certificate of Exemption (Form 3372)*

**Purchasers** may use this form to claim exemption from Michigan sales and use tax on qualified transactions. It is the Purchaser's responsibility to ensure the eligibility of the exemption being claimed. All claims are subject to audit. Non-qualified transactions are subject to tax, statutory penalty and interest.

**Sellers** are required to maintain records, paper or electronic, of completed exemption certificates for a period of four years. Michigan does not issue "tax exempt numbers" and a seller may not rely on a number for substitution of an exemption certificate. Other documentation that sellers in the State of Michigan may accept are the Uniform Sales and Use Tax Certificate approved by the Multistate Tax Commission, the Streamlined Sales and Use Tax Agreement Certificate of Exemption, the same information in another format from the purchaser, or resale or exemption certificates or other written evidence of exemption authorized by another state or country.

### SECTION 1:

Place a check in the box that describes how you will use this certificate.

A) Choose "One-Time Purchase" and include the invoice number this certificate covers.

B) Choose "Blanket Certificate" if there is a "recurring business relationship." This exists when a period of not more than 12 months elapses between sales transactions between the seller and purchaser.

C) Choose "Blanket Certificate" and enter the expiration date (maximum four years) when there is a period of more than 12 months between sales transactions.

Print the vendor's name and address in the area provided.

### SECTION 2:

Place a check in the box for "All items purchased" or choose "Limited to" and list the items that are covered by the exemption claim.

### SECTION 3:

Place a check in the box that applies and provide the additional information requested for that exemption. The exemptions listed are the most common. If the exemption you are claiming is not listed use "Other" and enter the qualifying exemption.

### SECTION 4:

Use the number that describes your business or explain any other business type not provided.

01	Accommodations	10	Utilities
02	Agricultural	11	Wholesale
03	Construction	12	Advertising, newspaper
04	Manufacturing	13	Non-Profit Hospital
05	Government	14	Non-Profit Educational
06	Rental or leasing	15	Non-Profit 501(c)(3) or 501(c)(4)
07	Retail	16	Qualified Data Center
08	Church	17	Other
09	Transportation		

Print the name of the business, address, city, state and ZIP code. Sign and provide your title (i.e. owner, president, treasurer, etc.). Provide your printed name and date the certificate.

THE COMPLETED CERTIFICATE MUST BE RETAINED IN YOUR RECORDS IN THE EVENT OF AN AUDIT.

**DO NOT SEND THIS EXEMPTION CERTIFICATE TO THE DEPARTMENT OF TREASURY.**