

Name of: (Check one box) <input checked="" type="checkbox"/> Exempt Organization <input type="checkbox"/> Qualifying Governmental Agency <b>The President &amp; Trustees of Colby College/Colby College</b>	Federal Employer Identification Number <b>01-0211497</b>
Address of Exempt Organization or Qualifying Governmental Agency <b>4000 Mayflower Hill Waterville, ME 04901</b>	Connecticut Exemption Permit Number (If any) <b>E-8694</b>

(If the exempt organization was not issued a Connecticut exemption permit (E-number), attach a copy of the exempt organization's I.R.C. §501(c)(3) or (13) determination letter.)

Name of Retailer	Check Appropriate Box(es) <input type="checkbox"/> Meals <input type="checkbox"/> Lodging
Address of Retailer	

Describe Purpose or Reason for Events: (Be specific. For example, meeting of board of trustees, or luncheon to honor volunteers)

Will the exempt organization or qualifying agency receive reimbursement, full or partial, for any or all of the meals or lodging? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will the retailer of the meals or lodging directly invoice and charge the agency or organization for the meals or lodging? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Will a charge, by whatever name called, be made for the meals or lodging by the exempt organization or qualifying governmental agency to those who will consume the meals or lodging? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will the agency or organization directly pay the retailer of the meals or lodging with a check drawn on its own checking account or with a credit card issued in its own name (and not in the name of one of its members, employees or officers)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Declaration by Exempt Organization or Qualifying Governmental Agency**

I declare that the exempt organization or qualifying governmental agency:

- Is being directly invoiced and charged by the retailer;
- Is directly paying the retailer with a check drawn on its own account or with a credit card issued in its own name; and
- Will not be reimbursed, directly or indirectly, by donation or otherwise, for all or a portion of the cost of the meals or lodging by those consuming the meals or lodging.

I also declare that any exemption permit noted on this certificate or any determination letter or group exemption letter (as the case may be) attached to this certificate has not been canceled or revoked. I declare under penalty of law that I have examined this document (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

<u>Dawn Genest</u>	<u>01/09/2024</u>	<u>(207) 859-4126</u>
Signature of Authorized Person	Date	Telephone Number
<u>Dawn Genest</u>	<u>Asst. Dir., Financial Services</u>	
Print or Type Name	Print or Type Title	

**Notice to Retailers:** Do not accept this certificate if the following section has not been completed and DRS official approval has not been noted.

**This Section is Completed by the Department of Revenue Services**

**Request Approved by the Department**

<u>Official Approval/Department of Revenue Services</u>	<u>Date Approved</u>
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**Expiration of Blanket Certificate:** This certificate expires on \_\_\_\_\_

**Request Disapproved by the Department**

- Exempt organization did not provide proof of exempt status. (Connecticut exemption permit number or I.R.C. §501(c)(3) or (13) determination letter.)
- Exempt organization or qualifying governmental agency will not be directly invoiced and charged by the retailer of the meals or lodging.
- Exempt organization or qualifying governmental agency will not directly pay the retailer of the meals or lodging with a check drawn on its own checking account or with a credit card issued in its own name (and not in the name of one of its members, employees or officers).
- Exempt organization or qualifying governmental agency will be reimbursed, in whole or in part, for its payment for the meals or lodging by those consuming the meals or lodging.

<u>Official Disapproval/Department of Revenue Services</u>	<u>Date Disapproved</u>
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**For More Information:** For other information, call the *Exempt Organization Coordinator* at **1-800-382-9463** (in-state) and choose Option 0 or **860-297-5962** (from anywhere). **TTY, TDD, and Text Telephone** users only may transmit inquiries anytime by calling **860-297-4911**. Preview and download forms and publications from the DRS website at [www.ct.gov/DRS](http://www.ct.gov/DRS)

Submit this certificate for approval to: Department of Revenue Services  
Exempt Organization Coordinator  
450 Columbus Blvd Ste 1  
Hartford CT 06103-1837