



# Sales and Use Tax Department

PO Drawer 2050; 2439 6<sup>th</sup> Street Lake Charles, LA 70602-2050

## Calcasieu Parish School Board

BUILDING FOUNDATIONS FOR THE FUTURE

www.calcasieusalestax.org

Karl Bruchhaus, Superintendent

(337) 217-4280 Fax (337) 217-4281

### APPLICATION FOR EXEMPTION CERTIFICATE

Under R.S. 47:305 (D)(4)(b)

Account # \_\_\_\_\_

Business Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_ Owner's S. S. # \_\_\_\_\_

Physical Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Physician's Office: \_\_\_\_\_

Purpose: *The procurement of prescription chemotherapy drugs that will be administered to patients in a physician's office where they are not kept as bed patients for 24 hours or more who have been diagnosed and are being treated for cancer all in accordance with the above referenced statute.*

### ACKNOWLEDGEMENT

I, \_\_\_\_\_, acting in an authorized capacity for the above cited company, do hereby certify that the information contained herein is true and correct to the best of my knowledge and that the certificate requested will be used solely for the purpose(s) specified in this application. Use of the certificate for any purpose other than made known in this application shall subject applicant to full penalties under the law of this state and local ordinances.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

#### FOR OFFICE USE ONLY:

Received: \_\_\_\_\_

Request: \_\_\_\_\_ Granted \_\_\_\_\_ Denied \_\_\_\_\_ Expiration Date: \_\_\_\_\_

If denied, give reason: \_\_\_\_\_

Signed: \_\_\_\_\_

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#### REPRESENTING

Calcasieu Parish School Board, STX Districts 2 & 3, Calcasieu Parish Police Jury, STX Districts 1 & 4A  
Calcasieu Parish Law Enforcement District, City of DeQuincy, Town of Iowa, City of Lake Charles  
City of Sulphur, Town of Vinton, City of Westlake, SWLa Convention & Visitors Bureau