

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF REVENUE



BUREAU OF BUSINESS TRUST FUND TAXES
DEPT. 280909
HARRISBURG, PA 17128-0909

SALES AND USE TAX
CERTIFICATE OF EXEMPTION

EMERGENCY MEDICAL SERVICES INSTITUT
221 PENN AVE STE 2500
PITTSBURGH PA 15221-2118

Entity ID: 25-1229491/000
Notice Number: 974-042-704-041-3
Notice Date: April 18, 2004
Account Number: 75-013-857
Exemption Type: CHARITABLE
Void After: October 31, 2008

USE OF THIS CERTIFICATE FOR PERSONAL OR NONEXEMPT PURCHASES WILL RESULT IN
CANCELLATION OF EXEMPT STATUS.

Always refer to your Account Number in correspondence.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF REVENUE
BUREAU OF BUSINESS TRUST FUND TAXES
DEPT. 280901
HARRISBURG, PA 17128-0901

PENNSYLVANIA EXEMPTION CERTIFICATE

CHECK ONE:

- ☒ STATE OR LOCAL SALES AND USE TAX
☐ STATE OR LOCAL HOTEL OCCUPANCY TAX
☐ PUBLIC TRANSPORTATION ASSISTANCE TAXES AND FEES (PTA)
☐ PASSENGER CAR RENTAL TAX (PCRT)

(Please Print or Type)

This form cannot be used to
obtain a Sales Tax License
Number, PTA License Number
or Exempt Status.

Read Instructions
On Reverse Carefully

THIS FORM MAY BE PHOTOCOPIED – VOID UNLESS COMPLETE INFORMATION IS SUPPLIED

- CHECK ONE: ☐ PENNSYLVANIA TAX UNIT EXEMPTION CERTIFICATE (USE FOR ONE TRANSACTION)
☒ PENNSYLVANIA TAX BLANKET EXEMPTION CERTIFICATE (USE FOR MULTIPLE TRANSACTIONS)

Name of Seller or Lessor

Street City State Zip Code

Property and services purchased or leased using this certificate are exempt from tax because: (Select the appropriate paragraph from the back of this form, check the corresponding block below and insert information requested.)

- ☐ 1. Property or services will be used directly by purchaser in performing purchaser's operation of: _____
- ☐ 2. Purchaser is a/an: _____
- ☐ 3. Property will be resold under License Number _____ (If purchaser does not have a PA Sales Tax License Number, include a statement under Number 7 explaining why a number is not required.)
- ☒ 4. Purchaser is a/an: Charitable Organization holding Exemption Number 75-013-857
- ☐ 5. Property or services will be used directly by purchaser performing a public utility service. (Complete Part 5 on Reverse.)
- ☐ 6. Exempt wrapping supplies, License Number _____ (If purchaser does not have a PA Sales Tax License Number, include a statement under Number 7 explaining why a number is not required.)
- ☐ 7. Other _____
(Explain in detail. Additional space on reverse side.)

I am authorized to execute this Certificate and claim this exemption. Misuse of this Certificate by seller, lessor, buyer, lessee, or their representative is punishable by fine and imprisonment.

Name of Purchaser or Lessee

EMSI

Street

221 Penn Ave #2500

Signature

K. [Signature]

City

Pittsburgh

Date

08/05/04

State

PA

Zip Code

15221

1. ACCEPTANCE AND VALIDITY:

For this certificate to be valid, the seller/lessor shall exercise good faith in accepting this certificate, which includes: (1) the certificate shall be completed properly; (2) the certificate shall be in the seller/lessor's possession within sixty days from the date of sale/lease; (3) the certificate does not contain information which is knowingly false; and (4) the property or service is consistent with the exemption to which the customer is entitled. For more information, refer to Exemption Certificates, Title 61 PA Code §32.2. An invalid certificate may subject the seller/lessor to the tax.

2. REPRODUCTION OF FORM:

This form may be reproduced but shall contain the some information as appears on this form.

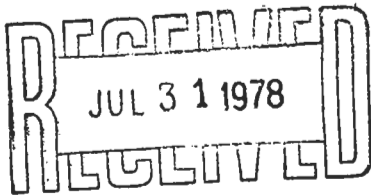
3. RETENTION

The seller or lessor must retain this certificate for at least four years from the date of the exempt sale to which the certificate applies. **DO NOT RETURN THIS FORM TO THE PA DEPARTMENT OF REVENUE.**

4. EXEMPT ORGANIZATIONS:

This form may be used in conjunction with form REV-1715, Exempt Organization Declaration of Sales Tax Exemption, when a purchase of \$200 or more is made by an organization which is registered with the PA Department of Revenue as an exempt organization. These organizations are assigned an exemption number, beginning with the two digits 75 (example: 75-00000-0).

Department of the Treasury


 District Director
 Internal Revenue Service

Date:

In reply refer to:

JUL 21 1978

EO:7300:Mrs. L. Dittman

Telephone: (301) 962-3281

- ▷ Emergency Medical Service Institute
 Suite 510
 564 Forbes Avenue
 Pittsburgh, PA 15219

Date of Exemption: October 1972

Internal Revenue Code Section: 501(c)(3)

Gentlemen:

Thank you for submitting the information shown below. We have made it a part of your file.

The changes indicated do not adversely affect your exempt status and the exemption letter issued to you continues in effect.

Please let us know about any future change in the character, purpose, method of operation, name or address of your organization. This is a requirement for retaining your exempt status.

Thank you for your cooperation.

Sincerely yours,

District Director

<u>Item Changed</u>	<u>From</u>	<u>To</u>
Articles of Incorporation- Amendment-name change	Allegheny County Council on Emergency Medical & Health Services	Emergency Medical Service Institute

**Commonwealth of Pennsylvania
Department of State
Bureau on Charitable Organizations**

No. AS 3774

Date OCTOBER 1, 1989

Certificate of Registration Under Solicitation Law

This is to Certify, that EMERGENCY MEDICAL SERVICE INSTITUTE

has duly registered with the Department of State, Commonwealth of Pennsylvania, under the provisions of Act. No. 337 of 1963 as amended by Act No. 246 of 1972, entitled "An Act Relating to charitable organizations requiring the registration of such organizations and regulating the solicitation of money and property by or on behalf of charitable organizations," and in compliance with the requirements of this Act and the rules and regulations prescribed by the Bureau on Charitable Organizations in the Department of State for its application, and having met the requirements of the laws of the Commonwealth of Pennsylvania in this regard:

IS AUTHORIZED to appeal to the public for donations, or to raise money by the sale of goods or services for charitable purposes, under the conditions and limitations prescribed in said Act and rulings of the Bureau.

This certificate is not to be used as identification nor does it constitute an endorsement.

Void if duplicated in any manner.


Secretary of the Commonwealth

ROBERT P. CASEY, Governor

This certificate expires OCTOBER 1, 1990