ST-12A (Rev 12/01)

DEPARTMENT OF REVENUE
Sales and Use Tax Division
1800 Century Center Boulevard, NE, Ste. 8214
Atlanta, Georgia 30345-3205
Telephone: (404) 417-6601

WAIVER OF VENDOR'S RIGHTS FOR REFUND

Name of Purchaser	Purchaser's Certificate Number
Name of Vendor	Vendor's Certificate Number
Vendor's Street Address, City or Town, State and Zipcode	

Date	Invoice No.	Gross Amount of Sale Excluding Tax	Exempt Portion, if any, of Sale	Tax Paid To Vendor By Purchaser	Item Sold

AFFIDAVIT OF VENDOR

The undersigned authorized representative of the above-named vendor does hereby certify under oath that the above figures are true and correct with respect to its transactions with the above-named purchaser for the periods indicated, that the sales tax shown paid was collected from this purchaser and was remitted to the Department of Revenue, and that this vendor disclaims any interest in said sales taxes remitted to the Department of Revenue and waives any right to refunds due therefor.

This day of _____,_____.

_____
Vendor

By: _____
Name and Title

Subscribed and sworn to:

This ____ day of _____,_____.

_____
Notary Public

THIS WAIVER SHALL BE ATTACHED TO AND MADE A PART OF SALES TAX CLAIM OF PURCHASER