California Resale Certification

Name of Purchaser/Company Name: _		
Social Security or Federal Identificatio	n Number:	
Address:		
		Zip:
Resale Certificate Number/VAT Certifi	cate:	
State/Country of Issue:		
Type of business in which purchaser is	s engaged:	
Type of tangible personal property or	service being purchased (be	specific as possible):
Name of vendor from whom tangible	personal property or service	es are being purchased:
CALIFORNIA ASIAN ART AUCTION GAL	LERY USA	
2646 Durfee Ave, El Monte, CA 91732		
Tel: +1-626-281-9588		
E-Mail: info@caa-auction.com We	ebsite: http://www.caa-auct	ion.com
and that it complies with California	state laws, and that I am in	the state in which I or my company conducts business the business of selling the kind of tangible personal I that I intend to sell such property or services in the
Signed under the penalties of perjury.		
Signature of Purchaser:		
Print name:		
Title:		Date :

Form not valid without a copy of a Resale Certificate

(Business Card or Business Letterhead Required)