



SHERATON

Denver Downtown Hotel

Welcome,

On behalf of the entire Team of the Sheraton Denver Downtown, we would like to extend a warm welcome to you.

As a hotel guest intending to file for tax exemption, we have prepared this letter to help assist in the process. Please completely fill out and submit all documents listed.

GOVERNMENT AGENCY Document Checklist:

(All items are required)

- ☐ FORM #1: Claim for Exemption from Denver Sales, Use or Lodger's Tax
- ☐ FORM #2: State of Colorado Affidavit of Non-Taxable Sale to Tax-Exempt Organization
- ☐ FORM #3: Standard Home Rule Affidavit of Exempt Sale
- ☐ COPY OF State issued tax certificate (not needed if federal government)

All filings will be reviewed in accordance with the City of Denver and State of Colorado tax code. If any filing is found to not be in accordance with said tax codes, the guest is responsible for the tax charges incurred during their stay. If a guest is denied tax exemption status, dispute forms can be provided by the hotel but must be filled directly by the guest with the appropriate city and state government agencies.



Affidavit of Exempt Event

This form is used by Denver exempt organizations to claim exemption from Denver sales, use or lodger's tax for an event held at a Denver hotel, motel or other event venue. The vendor (hotel, motel or restaurant) is required to maintain a completed form for each tax-exempt sale pertaining to the stated event.

Furnish this form to the seller. Retain this completed form for your records.

DO NOT RETURN TO THE DENVER TREASURY DIVISION UNLESS REQUESTED.

Organization/Agency Information

Legal Name of Organization or Agency	Website
Authorized Representative	Phone
Address	City
	State
	Zip

Event Information

Name of Event	Date of Event
Description of Event	

Exemption Information

The exemption does not apply to food, beverage or lodging where the recipient of the food, beverage or lodging reimburses the organization in any way, such as by the purchase of a ticket, payment of a fee, or making an involuntary contribution.

Basis of Exemption Charitable Governmental

ALL OF THE STATEMENTS BELOW MUST BE TRUE FOR THE PURCHASE TO QUALIFY FOR TAX EXEMPTION

Indicate if all of the following statements are true for this event:

Yes	No	The purchase is included under, and is part of, the regular charitable functions and activities of the organization, or is purchased in a governmental capacity.
Yes	No	The transaction is billed directly to the organization and payment is made directly from organization funds. (Purchases of food or lodging by individuals do not qualify for the exemption even though the individual will be reimbursed by the organization or government.)
Yes	No	The participants at the event have not and will not reimburse the organization in any way for the event such as by purchase of a ticket, payment of a registration fee, or by making an involuntary contribution.

Purchaser Information

Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent.

Purchaser's Signature	Date
Print Name	Driver's License #
	State

For Use by Hotel/Motel/Restaurant or Other Vendor to Verify Exemption

This form should be completed in its entirety and retained, together with a completed "Standard Municipal Home Rule Affidavit of Exempt Sale" form and customer's letter of Denver exemption (issued to charitable organizations) for a minimum of four years to assist in documenting an exempt transaction.

Employee's Signature _____ Date _____

Denver Exemption Verified By
(Employee's Printed Name)



Standard Municipal Home Rule Affidavit of Exempt Sale

This form is provided by home rule municipalities within the State of Colorado to record supporting information for any transaction on which an exemption from tax is claimed. The form is maintained by the seller for tax-exempt sales.

Furnish this form to the seller. Do not return this form to the taxing jurisdiction.

Purchase Details

☐ **Purchase for resale - or -** ☐ **Purchase for wholesale** (Qualifications may vary by jurisdiction – see instructions)

State license number (not FEIN number): _____

Expiration: _____

Local license number (if applicable): _____

Issuing municipality: _____

☐ I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial: _____

☐ **Purchase by charitable organization** (Exemptions may vary by jurisdiction)

State tax-exempt number (not FEIN number): _____

Local tax-exempt number (if applicable): _____

Issuing municipality: _____

Payment information (required to meet one of the following):

☐ Paid by cash and accompanied by a purchase order from the organization

☐ Paid by check drawn on funds of the exempt organization

☐ Paid by purchasing card bearing information of the exempt organization

The embossed name of the card is: _____

☐ Paid by commercial card not a personal credit card - card's last four digits: _____

☐ **Purchase for federal, state, or local government**

Credit card number (first six and last four only): _____ - _____ XX-XXXX- _____

Federal government (payment information – required to meet one of the following):

☐ GSA SmartPay3 card – fleet card with picture of a road

☐ GSA SmartPay3 card – purchase card with picture of an eagle

☐ GSA SmartPay3 card – travel card with picture of an airplane

☐ GSA SmartPay3 card – tax advantage card with picture of a hotel and car

☐ GSA SmartPay3 card – integrated card with picture of a globe

State and local government (payment information – required to meet one of the following):

☐ Paid by cash and accompanied by purchase order issued by the government agency

☐ Paid by check issued by and drawn on funds from the government agency

☐ Paid by government purchase card as designated on the card

State tax-exempt number printed on the card (Colorado only): _____

☐ Check if the card states “for official state use only” or “tax exempt”

☐ **Purchase for foreign and diplomatic exemptions (required to meet the following):**

☐ Purchaser presents a state department issued card with the name/photo of the bearer on the card.

If presented with this card, documentation of form of payment is not required (excluding mission card).

☐ **Other qualified exemption**

Nature of exemption: _____

Exempt number: _____

Purchaser Information

Legal Name of Company/Organization/Agency Name			Purchaser Name (Printed)	
Address		City	State	Zip + 4
Phone	State / Driver License #	Description of Normal Course of Business		
Under penalty of perjury, I swear or affirm that the information on this form is true and correct as to every material matter. I affirm that the items purchased tax-exempt will be used for official business of the above-named organization or agency. I accept that I remain directly liable for the taxes and any applicable penalty or interest if my purchase is found to not qualify for the exemption or if the information asserted in this form is deemed fraudulent.				
Signature			Date	

Seller Verification

Seller Name	Location #	Date	Transaction ID	Employee ID# / Initials
Description of Items Purchased or Attach Duplicate Receipt/Invoice				Exempted Amount of Purchase

State of Colorado

Department of Revenue
Denver, CO 80261-0013

Affidavit of Non-Taxable Sale to Tax-Exempt Organization

The undersigned declares, under penalties of perjury, that the tangible personal property or taxable service purchased without payment of otherwise applicable Colorado sales tax(es) from

Sheraton Denver
1550 Court Place
Denver, CO 80202

is to be paid from the tax-exempt organization's funds and that said organization has not and will not receive any reimbursement through either direct payment, collection or "donation" from any person(s) of the use or consumption of said tangible property or service.

Signature	Title
Name of Tax-Exempt Organization	
Mailing Address	
City, State, Zip	
Basis of Exemption	1 Religious 1 Charitable 1 Government
Sales Tax Exemption Number	
Date	

Payment must be made with organization's check or credits card, and not via cash or individual's check or credit card.
Attach a copy of the Tax-Exemption Certificate or other document evidencing tax-exempt status.

Please mail or fax completed forms to: Sheraton Denver
1550 Court Place
Denver, CO 80202
Attention: Credit Manager
(303) 626-2521
(303) 352-2475 fax