



EXEMPTION CERTIFICATE

TAX ON OCCUPANCY OF HOTEL ROOMS

DATE: _____

To be retained by operators of hotels, motels, and similar accommodations as evidence of exempt occupancy.

TO: _____
(NAME OF HOTEL, APARTMENT HOTEL, OR LODGING HOUSE)

(ADDRESS)

This is to certify that I, the undersigned, am a representative of the United States governmental department indicated below; the charges for the occupancy at the above establishment on the dates set forth below have been or will be paid for by such government unit; and that such charges are incurred in the performance of my official duties as a representative or employee of such governmental unit.

DATES OF OCCUPANCY: _____
(SIGNATURE)

GOVERNMENTAL UNIT: _____
(TITLE)

LOCATION OF HOME OFFICE:

U.S. Bankruptcy Court
501 I Street, Suite 3-200
Sacramento, CA 95814

NOTE: Operators of hotels, etc., should not accept this exemption certificate unless the person presenting it shows satisfactory credentials. A separate exemption certificate is required for each occupancy and for each representative. All records shall be retained for a period of three years.