

# Lodging Information

All registered State Leadership Conference delegates must stay at the conference hotel both Thursday and Friday night. The official conference hotel is:

**Denver Tech Center Marriott Hotel**

4900 South Syracuse Street

Denver, CO 80237

Phone: (303) 779-1100

Conference lodging rate is \$129.00 per night per room.

**Hotel Check-in:** Thursday, April 5, 2018 starting at 3 pm.

**Hotel Check-out:** Saturday, April 7, 2018 by noon

## **Reservations**

Make lodging reservations by March 10, 2018. All reservations will be made by completing the [Hotel Rooming List](#) and emailing it directly to Kory Hjelm at [Kory.Hjelm2@marriott.com](mailto:Kory.Hjelm2@marriott.com).

## **Parking**

Parking is complimentary on property as Colorado FCCLA paid for all car and bus parking.

## **Tax Exempt and Payment**

The hotel accepts payment via check, credit card, or wire transfer. ALL the following tax exempt forms must be submitted directly to Kory Hjelm at [Kory.Hjelm2@marriott.com](mailto:Kory.Hjelm2@marriott.com) by Friday, March 30, 2018.

*State Tax Exempt Certificate*

[Denver City Tax Exempt Claim Affidavit](#)

[Standard Colorado Affidavit of Exempt Sale](#)

[Standard Municipal Home Rule Affidavit of Exempt Sale](#)

*All forms must be completed entirely and payment must come directly from the tax exempt entity. No reimbursement is allowed. It is highly recommend that the entity claiming exemption sends in payment prior to the conference to ensure that your tax exemption can be processed in a timely manner.*



**CLAIM FOR EXEMPTION FROM DENVER SALES, USE OR LODGER'S TAX**  
**FOR USE BY HOTELS, MOTELS AND RESTAURANTS**  
**FOR THE FOLLOWING DESCRIBED EVENT**

(PLEASE TYPE OR PRINT LEGIBLY)

Organization's Name: \_\_\_\_\_

Date of event: \_\_\_\_\_ Phone #: \_\_\_\_\_

Authorized Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Basis of Exemption Religious  Charitable  Governmental

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 religious or charitable functions and activities of the organization, or is purchased in a governmental capacity.

           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.)

           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.

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.

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

The undersigned declares and affirms that the above statements are true and accepts liability for the tax, should the transaction not qualify for exemption.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

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FOR HOTEL/MOTEL/RESTAURANT USE TO VERIFY EXEMPTION

City of Denver, Treasury Division, Tax Compliance, Audit Unit - (720) 913-9955

Denver exemption verified by \_\_\_\_\_ Yes \_\_\_ No \_\_\_ Date \_\_\_\_\_  
(Hotel employee)

\_\_\_\_\_  
(City employee)



## Standard Colorado Affidavit of Exempt Sale

This form is required by the State of Colorado for any transaction on which an exemption from state tax is claimed for charitable and government entities. The seller is required to maintain a completed form for each tax-exempt sale.

**Furnish this form to the seller. Do not return this form to the State of Colorado.**

Purchase Details				
<input type="checkbox"/> <b>Purchase for resale - or -</b> <input type="checkbox"/> <b>Purchase for wholesale</b> (see instructions) State license number (not FEIN number): _____ Issuing state _____ Expiration _____ (Attach a copy of state license) <input type="checkbox"/> I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial _____				
<input type="checkbox"/> <b>Purchase by religious or charitable organization (exemptions may vary by jurisdiction)</b> State tax-exempt number (not FEIN number): _____ (Attach a copy of state exemption certificate) <b>Payment information (required to meet one of the following):</b> <input type="checkbox"/> Paid by cash and accompanied by a purchase order from the organization <input type="checkbox"/> Paid by check drawn on funds of the exempt organization <input type="checkbox"/> Paid by purchasing card bearing information of the exempt organization The embossed name of the card is: _____ <input type="checkbox"/> Paid by commercial card not a personal credit card - card's last four digits: _____				
<input type="checkbox"/> <b>Purchase by federal, state, or local government</b> <b>Credit card number (first six and last four only):</b> _____ - _____ <b>xx-xxxx-</b> _____. <b>Federal government (payment information - required to meet one of the following):</b> <input type="checkbox"/> GSA SmartPay2 card – fleet card with picture of a road and flag <input type="checkbox"/> GSA SmartPay2 card – purchase card with picture of a keyboard and flag <input type="checkbox"/> GSA SmartPay2 card – travel card with picture of an airplane and flag <input type="checkbox"/> GSA SmartPay2 card – integrated card with picture of an eagle and flag <input type="checkbox"/> Dept of Interior agency issued card – agency name _____. <b>State and local government (payment information - required to meet one of the following):</b> <input type="checkbox"/> Paid by check issued by and drawn on funds from the government agency <input type="checkbox"/> Paid by government purchase card as designated on the card State tax-exempt number printed on the card (Colorado only): _____. <input type="checkbox"/> Check if the card states "for official state use only" or "tax exempt"				
<input type="checkbox"/> <b>Purchase by foreign and diplomatic exemptions (required to meet the following):</b> <input type="checkbox"/> 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).				
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	



# 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	
<input type="checkbox"/> <b>Purchase for resale - or -</b> <input type="checkbox"/> <b>Purchase for wholesale</b> (Qualifications may vary by jurisdiction – see instructions) State license number (not FEIN number): _____ Expiration _____ Local license number (if applicable): _____ Issuing municipality: _____ <input type="checkbox"/> I affirm items purchased are for resale/wholesale in the ordinary course of business. Initial _____	
<input type="checkbox"/> <b>Purchase by religious or charitable organization</b> (Exemptions may vary by jurisdiction) State tax-exempt number (not FEIN number): _____ Local tax-exempt number (if applicable): _____ Issuing municipality: _____ <b>Payment information (required to meet one of the following):</b> <input type="checkbox"/> Paid by cash and accompanied by a purchase order from the organization <input type="checkbox"/> Paid by check drawn on funds of the exempt organization <input type="checkbox"/> Paid by purchasing card bearing information of the exempt organization The embossed name of the card is: _____ <input type="checkbox"/> Paid by commercial card not a personal credit card - card's last four digits: _____	
<input type="checkbox"/> <b>Purchase for federal, state, or local government</b> <b>Credit card number (first six and last four only):</b> _____ - _____ XX-XXXX- _____ <b>Federal government (payment information – required to meet one of the following):</b> <input type="checkbox"/> GSA SmartPay2 card – fleet card with picture of a road and flag <input type="checkbox"/> GSA SmartPay2 card – purchase card with picture of a keyboard and flag <input type="checkbox"/> GSA SmartPay2 card – travel card with picture of an airplane and flag <input type="checkbox"/> GSA SmartPay2 card – integrated card with picture of an eagle and flag <input type="checkbox"/> Dept of Interior agency issued card – agency name _____ <b>State and local government (payment information – required to meet one of the following):</b> <input type="checkbox"/> Paid by cash and accompanied by purchase order issued by the government agency <input type="checkbox"/> Paid by check issued by and drawn on funds from the government agency <input type="checkbox"/> Paid by government purchase card as designated on the card State tax-exempt number printed on the card (Colorado only): _____ <input type="checkbox"/> Check if the card states "for official state use only" or "tax exempt"	
<input type="checkbox"/> <b>Purchase for foreign and diplomatic exemptions (required to meet the following):</b> <input type="checkbox"/> 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).	
<input type="checkbox"/> <b>Other qualified exemption</b> 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	