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This spring, NASAFACS members will gather Monday, May 7 through Thursday, May 10 at the Sheraton Downtown Denver Hotel in Denver, Colorado to network with fellow members, attend professional development activities, develop a vision for Family and Consumer Sciences, and build relationships with business and industry professionals that support our profession. Don’t miss this amazing opportunity to share our accomplishments, conduct our business, and have fun!

**Membership**
If you are a NASAFACS member, you will have the option of renewing your membership for 2017-2018, prepaying for your 2018-2019 membership, or both on the registration website.

**Thursday Tour**
The conference will conclude with a tour of the Denver Center for Performing Arts (1400 Curtis Street, Denver, CO 80204) on Thursday, May 10 at 1:00pm.

Conference attendees are invited to attend a show that evening at their own expense. More information about shows playing will be emailed out to attendees.

**Meals on Your Own**
All meals during the conference are covered by registration. If you are extending your stay outside of the conference, you are welcome to enjoy the following restaurants onsite at the Sheraton Downtown Denver Hotel:

- 15|Fifty
- Peet’s Coffee & Tea
- Yard House
- Zoup!

*There are also numerous restaurants on the 16th Street Mall.*
<table>
<thead>
<tr>
<th>Monday, May 7</th>
<th>Tuesday, May 8</th>
<th>Wednesday, May 9</th>
<th>Thursday, May 10</th>
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<tbody>
<tr>
<td>1:00 – 5:00 pm</td>
<td>6:00 – 8:00 am</td>
<td>6:00 – 8:00 am</td>
<td>6:00 – 8:00 am</td>
</tr>
<tr>
<td>Executive Committee Meeting</td>
<td>Breakfast</td>
<td>Breakfast</td>
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<tr>
<td>Directors Row H</td>
<td>Hotel Club Lounge</td>
<td>Hotel Club Lounge</td>
<td>Hotel Club Lounge</td>
</tr>
<tr>
<td>5:00 – 7:00 pm</td>
<td>8:00 – 9:00 AM Welcome &amp; Introductions</td>
<td>8:00 – 11:00 am Associate Partner Updates</td>
<td>8:00 – 10:30 am FCS &amp; Career Clusters</td>
</tr>
<tr>
<td>Opening Session</td>
<td>9:00 – 9:15 Committee Overview</td>
<td>FCCLA – Sandy Spavone</td>
<td>10:45 – 11:45 am Creating Apprenticeships</td>
</tr>
<tr>
<td>15/ Fifty at the Sheraton</td>
<td>9:30 - 11:00 am Committee Work Session</td>
<td>ACTE Update – Rachel Gonzalez</td>
<td>11:45 am – 12:00 pm Closing Session</td>
</tr>
<tr>
<td></td>
<td>11:00 am - 12:00 pm Committee Reporting</td>
<td>AAFCS – Dr. Lori Myers</td>
<td>12:00 – 1:00 pm Lunch TBD</td>
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<tr>
<td></td>
<td>12:00 – 1:30 pm Lunch &amp; State Reports</td>
<td>Learning Zone - Joyce Matson</td>
<td>1:00 – 3:00 pm Afternoon Tour DPCA Backstage Tour</td>
</tr>
<tr>
<td></td>
<td>1:30 – 3:00 pm Work Based Learning Best Practices</td>
<td>CCFCS – Dr. Katy Blatnick-Gagne</td>
<td>5:00 – 6:00 pm Dinner On Your Own</td>
</tr>
<tr>
<td></td>
<td>3:00 - 3:30 pm Afternoon Break Hotel Club Lounge</td>
<td>11:00 am – 12:00 pm What’s New with Perkins</td>
<td>6:30 pm DCPA Show On Your Own Denver Center for Performing Arts Complex</td>
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<tr>
<td></td>
<td>3:30 - 4:30 pm Innovations in Perkins</td>
<td>Dr. Sarah Heath, CO CTE Director</td>
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<tr>
<td></td>
<td>4:30 – 5:00 pm Daily Wrap Up</td>
<td>12:00 – 1:00 pm Networking Lunch</td>
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<tr>
<td></td>
<td>6:00 – 8:30 pm Dinner in the City TBD</td>
<td>1:00 – 3:00 pm Business Meeting</td>
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<tr>
<td></td>
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<td>3:00 - 3:30 pm Afternoon Break</td>
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<tr>
<td></td>
<td></td>
<td>3:30 - 4:30 pm Afternoon Professional Session</td>
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<td>4:30 – 5:00 pm TBD</td>
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<td></td>
<td></td>
<td>6:00 – 8:30 pm Dinner in the City TBD</td>
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**Registration Timeline**

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
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<tbody>
<tr>
<td><strong>January 1</strong></td>
<td>Registration website opens</td>
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<tr>
<td><strong>March 15</strong></td>
<td>Early Bird Registration ends</td>
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<tr>
<td><strong>March 16</strong></td>
<td>Regulation Registration opens</td>
</tr>
<tr>
<td><strong>April 20</strong></td>
<td>Registration closes at midnight</td>
</tr>
<tr>
<td><strong>May 1</strong></td>
<td>Payment must be received.</td>
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</table>

**Payment Information**

*Payment for State Conference must be RECEIVED by May 1, 2018.*

**Check Payments**

Make check out to NASAFACS and send to:

<table>
<thead>
<tr>
<th>NASAFACS</th>
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<tbody>
<tr>
<td>4152 S Ouray Ct</td>
</tr>
<tr>
<td>Aurora, CO 80013</td>
</tr>
</tbody>
</table>

**Credit Card Payments**

Credit Card payments may be made through our PayPal account which is a safe, fast, free service to keep payment info confidential. The authorized school/district representative will enter their card information and payment amount into this secure site. Please email robert.vandyke@cccs.edu to pay by credit card.

**NO REFUNDS**

Registration fees are nonrefundable. Once registration closes on April 20, no additions or deletions can be made and no refunds will be given.

**Member Registration Rate**

- Early Bird Conference Registration: $200.00
- Regulation Conference Registration: $250.00

**Non-Member Registration Rate**

- Early Bird Conference Registration: $225.00
- Regulation Conference Registration: $275.00
Travel Information

Air Travel
Conference attendees should fly in and out of the Denver International Airport (DIA). DIA offers service to most US cities and flights from most major airlines. Visit www.flydenver.com/ for more information about your trip into Denver.

Ground Transportation
For your convenience, the following transportation options can provide airport transportation to and from Sheraton Denver Downtown:

- Super Shuttle: 1-800 258-3826
- Fox Limo Service: 303-882-0525
- Denver Yellow Cab: 303-777-7777
- Metro Taxi: 303-333-3333
- Freedom Cab: 303-444-4444

Train to the Plane | University of Colorado A Line
The University of Colorado A Line provides easy and affordable transportation between downtown Denver, Denver International Airport, and along I-70.

- Cost: Airport fare ($9.00) depending on your destination
- Train departs every 15 minutes and has 8 stations total, including Union Station and the Denver Airport station.
- Union Station is 1 mile from the Sheraton. You can walk down 16th Street Mall (22 minutes) or take the Free Mall Ride bus from Union Station to Court Street.

Ride Share (Uber, Lyft)
Uber and Lyft are available at DIA. There are two sides to the DIA terminal (East and West), so be sure to select the appropriate side after you hit “Request”. If you are unsure of your terminal, check the signs posted outside. Your driver will pick you up from the Passenger Pick Up on Level 6.
Lodging Information

The official conference hotel for the 2018 NASAFACS Spring Meeting is:

**Sheraton Downtown Denver Hotel**
1550 Court Place
Denver, CO 80202
Phone: (303) 893-3333

Conference lodging rate is $169.00 per night per room. This rate includes access to the Club Lounge, which offers complimentary breakfast, afternoon snacks, and 20% discounts on all food and beverage in hotel venues. This rate is good for 5 days prior and 3 days after the official conference dates.

**Hotel Check-in:** Monday, May 7, 2018 starting at 3 pm.
**Hotel Check-out:** Thursday, May 10, 2018 by noon

**Reservations**
Make lodging reservations by April 15, 2018. All reservations will be made by using the PASSKEY website at [https://aws.passkey.com/go/nasafacs2018](https://aws.passkey.com/go/nasafacs2018).

**Parking**
Self parking at the hotel is $40 per night per car.

**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 Caitlin Wobst at [Caitlin.Wobst@sheraton.com](mailto:Caitlin.Wobst@sheraton.com) by Friday, April 30, 2018.

- State Tax Exempt Certificate
- Denver City Tax Exempt Claim Affidavit
- Affidavit of Non-Taxable Sale to Tax-Exempt Organization
- Standard Home Rule Affidavit of Exempt Sale

Most entities are not eligible from exemption from the Denver City Tax of 10.75%. 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.
Request for Taxpayer Identification Number and Certification

1. Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

   W2007 MVP Denver LLC

2. Business name/disregarded entity name, if different from above.

   Sheraton Denver Downtown Hotel

3. Check appropriate box for federal tax classification; check only one of the following seven boxes:

   - Individual/sole proprietor or single-member LLC
   - C Corporation
   - S Corporation
   - Partnership
   - Trust/estate
   - Limited liability company. Enter the tax classification (LLC, corporation, S corporation, P=partnership)
   - Other (see instructions)

   Note: For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

4. Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

   - Exempt payee code (if any)
   - Exemption from FATCA reporting code (if any)

   Applies to accounts maintained outside the U.S.

5. Address (number, street, and apt. or suite no.).

   1550 Court Place

   Denver, CO, 80202

6. City, state, and ZIP code

7. List account number(s) here (optional)

   Requester's name and address (optional)

Part I - Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer Identification number

Part II - Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here

Signature of
U.S. person

Date

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN) to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1098-INT (interest earned or paid)
- Form 1098-DIV (dividends, including those from stocks or mutual funds)
- Form 1098-MISC (various types of income; prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.
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: ____________________________ Phone #: ______________

Date of event: _______________ 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: _______________

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)
**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.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Title</th>
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<table>
<thead>
<tr>
<th>Name of Tax-Exempt Organization</th>
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<table>
<thead>
<tr>
<th>Mailing Address</th>
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<table>
<thead>
<tr>
<th>City, State, Zip</th>
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<thead>
<tr>
<th>Basis of Exemption</th>
<th>1 Religious</th>
<th>1 Charitable</th>
<th>1 Government</th>
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<table>
<thead>
<tr>
<th>Sales Tax Exemption Number</th>
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<tr>
<th>Date</th>
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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
Standard Home Rule Affidavit of Exempt Sale

This form is required by home rule municipalities within the State of Colorado for any transaction on which an exemption from sales and use tax is claimed. 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 taxing jurisdiction.

**Purchase Details**

- ☐ PURCHASE FOR RESALE - OR - ☐ PURCHASE FOR WHOLESALE (QUALIFICATIONS MAY VARY BY JURISDICTION – SEE INSTRUCTIONS)
  - STATE LICENSE NUMBER (NOT FEIN NUMBER): _____________________________
  - LOCAL LICENSE NUMBER (IF APPLICABLE): _____________________________
  - ISSUE MUNICIPALITY: _____________________________
  - ☐ I AFFIRM ITEMS PURCHASED ARE FOR RESALE/WHOLESALE IN THE ORDINARY COURSE OF BUSINESS. INITIAL _____________

- ☐ PURCHASE BY RELIGIOUS OR CHARITABLE ORGANIZATION (EXEMPTIONS MAY VARY BY JURISDICTION)
  - STATE TAX EXEMPT NUMBER (NOT FEIN NUMBER): _____________________________
  - LOCAL TAX EXEMPT NUMBER (IF APPLICABLE): _____________________________
  - ISSUE 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 BY 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 SMARTPAY2 CARD – FLEET CARD WITH PICTURE OF A ROAD AND FLAG
      - ☐ GSA SMARTPAY2 CARD – PURCHASE CARD WITH PICTURE OF A KEYBOARD AND FLAG
      - ☐ GSA SMARTPAY2 CARD – TRAVEL CARD WITH PICTURE OF AN AIRPLANE AND FLAG
      - ☐ GSA SMARTPAY2 CARD – INTEGRATED CARD WITH PICTURE OF AN EAGLE AND FLAG
    - ☐ DEPT OF INTERIOR AGENCY ISSUED CARD – AGENCY NAME _____________________________.
    - 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
      - ☐ CHECK IF THE CARD STATES “FOR OFFICIAL STATE USE ONLY” OR “TAX EXEMPT”

- ☐ PURCHASE BY 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
  - TYPE OF EXEMPTION: _____________________________
  - EXEMPT NUMBER: _____________________________

**Purchaser Information**

- LEGAL NAME OF COMPANY/ORGANIZATION/AGENCY NAME
- PURCHASER NAME (PRINTED)
- ADDRESS
- CITY
- STATE
- ZIP + 4
- PHONE
- STATE / DRIVERS 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