

nis i	orm is to be retained by the customer.				
Manufacturer	Manufacturer of Raw Materials Name				
	Address	City		State	Zip Code
ner	Customer's Name				
Customer	Address	City		State	Zip Code
Sections is a section of the section	twenty-five percent (25%) recovered materials. on 260.200(28) RSMo defines "Recovered Materials" as those reuse, or recycling, whether or not they require subsequent separete manufacturer of product supplied to the customer stated abovelations must be by volume or weight. In accordance with Section of the control of the customer stated abovenue or her or his duly authorized agents.	aration and processing ve, this declaration is	g. required by the Miss	ouri Depart	ment of Revenue (Department
Note: The manufacturer should make a good faith estimate of the material supplied to the customer. The manufacturer is responsible for providing the Department of Revenue accurate and complete information concerning the materials supplied to the customer.					
	Product Supplied		101		Year Supplied
uct Information	Description of the Recovered Materials* Contained in Product				
	Total Weight or Volume of the Recovered Materials*	10	Total Weight or Vo	ume of all	Materials Contained in Produc
	Percentage of Recovered Materials Contained in Product**	Calculations by (Sele	ect One):	Volume	Weight
uct	To determine the percentage of recovered materials contained in the product, you must divide the total weight or volume of the recovered materials				

Recovered Materials include post-industrial materials and post-consumer materials but does not include materials and by-products from an original manufacturing process which are merely reused within the process.

A separate form is required for each product supplied to the customer and for each year supplied. If desired, a supplemental schedule may be attached for additional products rather than using a separate form.

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct. Signature Title Date (MM/DD/YYYY) Printed Name

Form 5021 (Revised 10-2013)

Phone: (573) 751-2836 TDD: (800) 735-2966



by the total weight or volume of all materials contained in the product.



