

Vender Info: Sons of Liberty Gun Works LLC
2828 S Lardeo St, San Antonio, TX 78207

Req By: Police Department
Auth By: Int. Chief A. Kingston B-2 *AK 2/7/25*
Charge to Acct: _____
Apprvd By: _____

Received: _____

Date	Delivery Date	Ship Via	Project #	Requisition #	Purchase Order #
02-06-2025					
Description of Material			QTY	Price	Amount
M4-EXO3 CUSTOM RIFLE (11.5-SBR)			12	\$885.90	\$10,630.80
Flatline Fiber - 2 Point Black Sling			12	\$65.00	\$780.00
Vortex Sparc AR Red Dot			12	\$132.40	\$1,588.80
Lifetime Warranty			1	\$0	\$0
Critical Use Replacement			1	\$0	\$0
TOTAL					\$12,999.60

Estimate



Loyal 9 Mfg.

Sons of Liberty Gun Works
2828 Laredo St
San Antonio, TX 78207
Phone: +12104128552

Order #	Date
SQUOTE LE27750-24	02/06/2025



Bill To:
Bay St. Louis Police Dept. 547 Main Street Bay St. Louis, MS 39520 Phone: 228-466-5475 Email: solsen@baystlouis-ms.gov

Ship To:
Bay St. Louis Police Dept. 547 Main Street Bay St. Louis, MS 39520

Contact: Bay St. Louis Police Dept.

Customer: Bay St. Louis Police Dept.

Sales Rep	Payment Terms	FOB Point	Carrier	Ship Service	Date Scheduled
William Phebus	NET 30	Origin	UPS	Ground	02/06/2025

Item #	Type	Number	Description	Unit Price	Qty Ordered	Total Price
1	Sale	M4-EXO3 CUSTOM RIFLE	M4-EXO3-M-11.5-SBR LWR: L9 COLOR: ANO MD:A2 SEL:MS-AMBI STS: MBUS	\$885.90	12 ea	\$ 10,630.80
2	Sale	FFRSABK608-KIT	Flatline Fiber - 2 point Black sling, non-padded, with (2) QD's	\$65.00	12 ea	\$ 780.00
3	Sale	Vortex Sparc Ar Red Dot	Vortex Sparc Ar Red Dot	\$132.40	12 ea	\$ 1,588.80
4	Sale	LIFETIME WARRANTY - INCLUDING WEAR	LIFETIME WARRANTY - INCLUDING WEAR	\$0.00	1 ea	\$ 0.00
5	Sale	CRITICAL USE REPLACEMENT	CRITICAL USE REPLACEMENT	\$0.00	1 ea	\$ 0.00

Subtotal: \$12,999.60
Sales Tax: \$0.00
Total: \$12,999.60

Approval:_____ Date:_____

ITAR Notice: Export of the commodities described herein may be strictly prohibited without a valid export license issued by the U.S. Department of State, Office of Defense Trade Controls prescribed in the International Traffic in Arms Regulation (ITAR), Title 22, Code of Federal Regulations, Parts 120-130.

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. LOYAL 9 MFG LLC	
2 Business name/disregarded entity name, if different from above SONS OF LIBERTY GUN WORKS	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► <u>S</u> Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ►	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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 2828 SOUTH LAREDO STREET	Requester's name and address (optional)
6 City, state, and ZIP code SAN ANTONIO, TX 78207	
7 List account number(s) here (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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-			-			
or									
Employer identification number									
8	4		-	4	7	8	7	2	0

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► <u>WILLIAM PHEBUS</u>	Date ► 01/01/2025
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-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, later.

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

EXEMPTION CERTIFICATE (USE BY STATE OR LOCAL GOVERNMENTS)
(For use by State and local governments (section 4221(a)(4) of the Internal Revenue Code).)

February 06, 2025 I hereby certify that I am Lieutenant Dylan Murphy
(Month & Day) *(Title of Officer)*
 of Bay Saint Louis Police Department; that I am authorized to execute this certificate; and that
(State or local government)

(check applicable type of certificate):

- ☐ The article or articles specified in the accompanying order, or on the reverse side hereof, (or)
☒ All orders placed by the purchaser for the period commencing 2/6/25 and ending 2/6/26,
(Date) *(Date)*
(period not to exceed 12 calendar quarters)

are, or will be, purchased from Sons of Liberty Gun Works LLC for the
(Name of manufacturer)
 exclusive use of Bay Saint Louis Police Department
(Governmental unit)
 of City of Bay Saint Louis, State of Mississippi
(State or local government)

I understand that the exemption from tax in the case of sales of articles under this exemption certificate to a State, etc., is limited to the sale of articles purchased for its exclusive use¹. I understand that fraudulent use of this certificate for the purpose of securing this exemption will subject me and all parties making such fraudulent use of this certificate to all applicable criminal penalties under the Internal Revenue Code.

SIGNATURE

PRINTED NAME

ADDRESS

547 Main Street
 Bay Saint Louis, MS 39520
 228-467-9222
 228-466-5483
 ORI - MS0230200

Lieutenant Dylan Murphy

¹ A sale of an article to a State or local government for resale is not considered to be a sale for the "exclusive use" of the State or local government, within the meaning of section 4221(a)(4) of the code, and, therefore, such sales may not be made tax-free. Such sales may not be made tax-free even if the resales are made to government employees, or the article is an item of equipment the employee is required to possess in carrying out his duties.

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. In some cases, persons who sell firearms or ammunition tax-free use specific exemption certificates to support the tax-free sales. This form contains all required information for a properly executed certificate. This is being provided to promote uniformity among excise taxpayers and eliminate the need for taxpayers to design their own certificates. The information requested is required by Title 27, Code of Federal Regulations, Part 53.

We estimate the average burden associated with this collection of information is 45 minutes per respondent or recordkeeper, depending on your individual circumstances. Address your comments concerning the accuracy of this burden estimate and suggestions to reduce this burden to: Reports Management Officer, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau, 1310 G Street NW., Box 12, Washington, DC 20005.

TTB may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a current, valid OMB control number.