

K-State Student Union
CUSTOMER INFORMATION FORM

Date: _____

College, department or business name: _____

Invoice billing address: _____

Contact name: _____

Email: _____ Phone: _____

This is a new customer. This is an update for a current customer.

Customer is a:
University department University affiliate Food/catering provider Retail business
Government entity Other: _____

Department Student Organization - Name of DSO university depart: _____

Customer tax exemption status: Tax exempt* Not tax exempt

**A copy of the customer's tax exemption form is required and must be attached to this form.*

Department or business head signature: _____

This form is required to be completed in its entirety and submitted to the K-State Student Union prior to the Union providing any service.

Submit form and supporting documentation to:
K-State Student Union | Attention Business Services | Rm. 311
918 N. MLK JR. Drive, Manhattan, KS 66506
(785) 532-6575 | unionbusofc@k-state.edu

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