

Important - Not valid unless completed.

OUT-OF-STATE EXEMPTION CERTIFICATE

Check Applicable Block
Blanket
Single Purchase

I hereby certify that THE UNIVERSITY OF SOUTHERN MISSISSIPPI
Name of Agency or Institution
Box 5143, Hattiesburg, MS 39406
Address

[REDACTED]

Name of Vendor _____
Address _____
will be used solely for the exempt purpose.
Description of property or services to be purchased: _____

In the event that the property or services purchased are not used for the exempt purpose, it is understood that I am required to pay the tax measured by the purchase price.
It is also understood that the information contained herein can be provided to the state of residence. Under penalties of perjury, I swear or affirm that the information on this certificate is true and correct as to every material matter.

[Signature] Director of Athletics
Title