

# VENDOR FORM

**Action:** \_\_\_\_\_ (Add, Change)

**Vendor No.** \_\_\_\_\_ **Federal Tax Id or SS#** \_\_\_\_\_

**Vendor Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address** \_\_\_\_\_

**City:** \_\_\_\_\_ **State,** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Telephone#** \_\_\_\_\_

**Fax #** \_\_\_\_\_

*Payment Address (only if different from above)*

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_, Zip \_\_\_\_\_

Requested by \_\_\_\_\_ Date \_\_\_\_\_ Campus \_\_\_\_\_

**ALL OF THE ABOVE ITEMS ARE REQUIRED IN ORDER TO ADD VENDOR**

## Business Office Use Only

Received (date) \_\_\_\_\_ Entered (date) \_\_\_\_\_ By: \_\_\_\_\_

Notified Campus (date/person) \_\_\_\_\_

W-9 Form issued (date) \_\_\_\_\_ W-9 Form received (date) \_\_\_\_\_

Business Status (as per W-9) \_\_\_\_\_

1099 Vendor (Yes or No) \_\_\_\_\_