**New Vendor Request**

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This form should only be used for the following: 1) Vendor is not in the system 2) updating

vendor information.

# PLEASE CHECK THE VENDOR UST THOROUGHLY BEFORE COMPLETING THIS FORM.

**D** W-9 Request for Taxpayer Identification Number (must accompany all new vendor

requests)

Vendor Address Information Check Address if Different

|  |  |
| --- | --- |
| Name: |  |
| 2nd Name: |  |
| Address: |  |
| 2nd Address: |  |
| City: |  |
| State: |  |
| Zip Code: |  |

Telephone \_ Fax Email address ----------------------------

Reason for request: \_

Requested By -------------------

# FOR TREASURER'S OFFICE USE

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S.A. M. Excluded Parties -----

Treasurer Approval: \_

Entered ------

Auditor of State Finding for Recovery \_

Vendor# \_ W-9 attached-----