



New Vendor Request Form

CALL PURCHASING PRIOR TO MOVING FORWARD.

All required forms (IRS W9 or W8 and Conflict of Interest) to be completed by the vendor must be attached to this form.

Select Vendor Type

(must check one)

Individual/Sole Proprietor

All Foreign Company/Individuals

All Corporations

Employer Identification # or Social Security # as provided on the Form W-9: _____

Vendor Name as provided on the Form W-9 or W-8: _____

Remittance Address as provided on the Form W-9 or W-8:

Purpose for New Vendor: _____

Estimated Dollar Amount \$ _____

COM Employee Contact Name: _____ Phone #: _____

COM Employee Contact Signature: _____ Date: _____

Email Address: _____

Department Name & G/L Budget #: _____

Budget Manager Approval: _____ Date: _____

When completed, forward the request and the required forms to the Purchasing Department.

Receiver's Signature: _____ Date: _____

Date Vendor Entered into System: _____ Vendor #: _____ Initials: _____