

VENDOR INFO REQUEST

BY COMPLETING AND SUBMITTING THIS FORM AND A W9, VENDOR AGREES TO ACCEPT PURCHASE ORDERS WITH NET 30 DAY PAYMENT TERMS.

COMPLETE AND RETURN BY Mail:

PHX UNION HIGH SCH DIST #210 Attn: CEE-2, A. Wheeler 4502 N. Central Ave. Phoenix, AZ 85012

P: 602-764-1400

Email: awheeler@PhoenixUnion.org

VENDORS IN AGREEMENT: Complete all that apply and send with your W-9. **NOTE:** If you are using your Social Security Number in lieu of a Tax ID #, the District will require a photocopy of your Social Security Card or Passport.

EXISTING VENDORS: Phoenix Union High School District has received your W-9, and now requires additional information to speed processing and verify State of Arizona TAX status.

Please have your financial department complete the following so we can finalize your firms profile as a vendor for the Phoenix Union High School District. For questions, contact Purchasing at (602) 764-1405.

GENERAL VENDOR INFORMATION	NAME OF VENDOR:					
	Federal Employer Identification #:		or	Social Security #:		
	Street Address:					
	City:	State:			Zip Code:	
	Main Business Phone #:					
	Website:					
ORDERING INFORMATION	Order Address:					
	City:	State:		Zip Code:		
	Vendor Order Phone #:			Order Fax	#:	
	Vendor Order Email:					
ACCOUNTING INFORMATION	Remittance Address:					
	City:	State:			Zip Code:	
	Accounts Receivable Phone #:			Accounts Receivable Fax #:		
	Accounting Email:					
	Collections Email:					
VENDOR	Women-owned enterprise					
DISCLOSURES Please check all						
that apply.	Small business					
DETERMINE USE TAX INFORMATION	Do you have an Arizona Transaction Privilege Tax License? No Yes #?					
	Do you have a physical Arizona Location? No Yes					
	Do you have a local representative or local contract installer/contractor? No Yes					
	Do you lease equipment in Arizona? No Yes					
	Is this for software sales? No Yes					
	Is there a license agreement? No Yes					