

1/2019

### REQUEST FOR SUPPLIER TO BE ADDED TO VENDOR LIST

Please email or fax completed forms to:

School Name \_\_\_\_\_ Email \_\_\_\_\_  
Attention \_\_\_\_\_ Fax \_\_\_\_\_

**Please be advised the Jefferson County Board of Education requires the issuance and approval of purchase orders for all goods and services. Please do not accept orders without an approved purchase order. Any vendor that accepts an order without a purchase order does so at their own risk. Entire Form must be completed along with a completed W-9 Form.**

Supplier Name \_\_\_\_\_

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

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

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

List your Federal Tax ID or Social Security Number \_\_\_\_\_

Are you providing Goods  or Services  Specify Type of Services  
\_\_\_\_\_

**REMIT Payment** Address \_\_\_\_\_

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

I certify that all information supplied herein is correct.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

**\*\*\* FOR SCHOOL OR DEPARTMENT USE ONLY – PLEASE COMPLETE\*\*\***

**Name of school or department & individual requesting that this supplier be added.**

\_\_\_\_\_  
School/Department

\_\_\_\_\_  
Individual's Name

BOARD NEXTGEN OR  LOCAL SCHOOL NEXTGEN