

Wake County Public School System Vendor Information Form

(Instructions attached, if necessary)

Please complete and return as soon as possible. We have a request to issue a purchase order or check to you and we need the vendor form in order to process the request.

ORDER ADDRESS:

VENDOR NAME: _____

STREET/PO BOX: _____

CITY, STATE, ZIP CODE: _____

PAY ADDRESS (IF DIFFERENT FROM ORDER ADDRESS):

VENDOR NAME: _____

STREET/PO BOX: _____

CITY, STATE, ZIP CODE: _____

CONTACT PERSON: _____

TELEPHONE #: _____ (____) _____

FAX #: _____ (____) _____

E-MAIL ADDRESS: _____

FEDERAL TAX ID #: _____ - _____ **OR**

SOCIAL SECURITY #: _____

(YOU MUST PROVIDE US A TAXPAYER ID # (EITHER SS# OR FEDERAL ID #) IN ORDER TO RECEIVE PAYMENT)

1. Name(s) of Owner(s) of Company: _____

2. Are any owners in #1 related to any employee of Wake County Public School System?
Yes _____ No _____

3. If your answer to #2 above is Yes: _____
Owner Name

WCPSS Employee	Position/Dept. Employed	Relationship
4. Is your company incorporated?	Yes _____ No _____	
5. Invoice payment terms?	Net 30 _____ 1% 10 Net 30 _____ 2% 10 Net 30 _____	
	Other _____	

6. Is your company a vendor of any N.C. Department of Administration Division of Purchase and Contract certification? Yes _____ No _____ Not Sure _____

7. This firm certifies that it is a: Woman Owned _____ Minority Owned _____ Disabled Owned _____

(NOTE: TO QUALIFY FOR W/M/D STATUS, 51% OF THE COMPANY MUST BE OWNED AND CONTROLLED BY A WOMAN, MINORITY, OR DISABLED INDIVIDUAL)

8. Are you a supplier of goods _____ or a service provider _____

9. Are you a government agency? Yes _____ No _____

10. Do you receive retirement income from the N.C. Retirement System? Yes _____ No _____

Please fax completed Vendor Information Form to:

School/Dept

Fax Number



Dear Vendor:

In order to be an active vendor with the Wake County Public School System and to have purchase orders and checks issued to you, a complete Vendor Information Form must be submitted. Please complete the Vendor Information Form and fax to:

School/Dept

Fax Number

Questions 2-3 are to satisfy the conflict of interest standards of the Wake County Board of Education.

Question 4 relates to Internal Revenue Service reporting requirements. To be an active vendor you must provide either a federal tax identification number or a social security number.

Question 5 relates to your payment terms.

Questions 6-7 are to satisfy North Carolina statutes, which require identification of expenditures with vendors on state contract and with companies owned by minorities, women, and/or disabled persons.

Question 8 relates to goods or services. You are a supplier if your company is actually selling a particular item or items.

Question 9 relates to government agencies.

Question 10 relates to required reporting to the NC Retirement System.

Any person or entity receiving payment from the Wake County Public School System, regardless of reason, is for our purposes considered to be a vendor.

If you have any questions, please call me at _____ or fax your completed Vendor Information Form to _____. Thank you for your prompt attention to this request.

Sincerely,