



Mail to: Tulsa Public Schools
 Purchasing Department
 PO Box 470208, Tulsa, OK 74147-0208
 Email: purchasing@tulsaschools.org
 Fax: 918-746-6469

VENDOR REGISTRATION

GENERAL INFORMATION

Business Name (AS ON IRS TAX FILINGS)			
DBA (DISREGARDED ENTITY)			
Main Address			
City, State, Zip			
Taxpayer ID Number	EIN:	or SSN:	
Website			
Terms	Check below if applicable		
Discount %	Female Owned?	<input type="checkbox"/> Yes	
Days to Discount	Minority Owned?	<input type="checkbox"/> Yes	
Days to Net	Veteran Owned?	<input type="checkbox"/> Yes	

PURCHASE ORDER CONTACT

Contact Person			
Address (if different)			
Email			
Phone			Fax:
Preferred method to receive POs	<input type="checkbox"/> Email	<input type="checkbox"/> US Mail	

REMITTANCE INFORMATION

Business Name			Do you accept MasterCard?
Remit Address (if different)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Remit Address (continued)			Explain any restrictions:
City, State Zip			ACH/Direct Deposit: <input type="checkbox"/> Checking <input type="checkbox"/> Saving
Contact Person			Bank Name:
Email for A/R			Routing Nbr:
Phone for A/R			Account Nbr:

COMMODITY CODES

Refer to TPS Master Commodity List and note your specific 5-digit product/service code(s) in the boxes below.

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(Consult www.irs.gov as needed)

REQUIRED FEDERAL TAX INFORMATION

Form **W-9**

You may complete the area below OR provide your signed W-9 form (August 2013 version or later).

(Rev. December 2014)

<p>Federal Tax Classification (check only one of the following seven boxes):</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited Liability Company plus tax class of LLC: _____ (C=C Corporation, S=S Corporation, P=Partnership)</p> <p>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</p> <p><input type="checkbox"/> Other (see IRS instructions) _____</p>	<p>Exemptions (codes apply only to certain entities, not individuals; see page 3 of IRS instructions)</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><i>(Applies to accounts maintained outside the U.S.)</i></p>
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Certification: Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. citizen or other U.S. person (defined below), and (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Sign Here	Signature of U.S. person ▶
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Date ▶
