

SAN ANGELO INDEPENDENT SCHOOL DISTRICT

SOLE SOURCE VENDOR INFORMATION FORM

After you have completed the form please mail the form with completed W-9 and notarized Sole Source Affidavit to 1621 University, San Angelo, TX 76904

Company Name: _____

Address: _____

Telephone: _____

Fax: _____

Contact Name: _____

E-Mail Address: _____

Web Site: _____