



Brownsville Independent School District

Finance Department

Vendor Addition Request Form

Completed W-9 Form must be submitted for vendor to be added.

BISD Information:			
Requested by Campus/Dept.			
BISD Contact Person:		Telephone #	
Company Information:			
Company Name:			
Please check one:	Sole:	Corp:	Other:
Correspondence Address:			
City/State/Zip Code:			
Remit (Payment) to Address:			
City/State/Zip Code:			
Telephone Number:		Fax Number:	
Contact Person:			
E-Mail Address:			
Tax ID#/SSN:			
Please state justification for adding new vendor:			

Please e-mail form to Hilda Alvear at: halvear@bisd.us

Office Use Only:
Date Received: _____
Vendor number: _____