



HSD2 Purchasing Department
1060 Harrison Road
Colorado Springs, CO 80905

Purchasing Manager
(719)579-2034
purchasing@hsd2.org

Vendor Registration Form (Substitute W-9)

For timely and accurate payments, please provide complete information below

Business Information

Legal Company Name:
DBA:
Phone: Fax: E-mail:
Company Address:
City: State: ZIP Code:
Please check one: Sole proprietorship Partnership Corporation Other:
Employer Identification Number: Social Security Number:

CERTIFICATION:
Under penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number...
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 U.S. resident alien or other U.S. entity (i.e. partnership, company, estate, domestic trust).
Authorized Signature: Date:

Order / Sales Information

Sales mailing address:
City: State: ZIP Code:
Telephone: Fax:
Sales contact name: Phone#:
E-mail:

Payment Remittance Information

Credit Cards Accepted? Yes No Colorado PERA Retiree? Yes No
Payment Address:
City: State: ZIP Code:
Telephone: Fax:
Accounts Receivable contact name:
Phone#: E-mail:

Per IRS regulations we are required to obtain vendor information when making reportable payments. If we are not able to obtain this information or have incorrect information on hand, payments may be subject to advance tax withholdings at the rate of 28% (addl fees may apply).

For Harrison School District #2 Use Only
Requested by: Vendor Number: