



CANTON PUBLIC SCHOOL DISTRICT

Office of Business and Finance

Tony Foster
Director

Tracy Lewis
Asst. Director

TO: All Vendors of the Canton Public School District

Mississippi public school districts must make purchases in accordance with the Mississippi Code of 1972, Annotated. In accordance with his Code and the district purchasing policy, all purchases of goods and services require prior authorization through the issuance of an approved purchased order.

Purchase orders are documents used to give legal spending authority. A purchase order is valid only after a signed copy is provided to the vendor (**not a purchase order number**). Additionally, as indicated on the purchase order, no backorders will be allowed. Purchase orders will include a detailed listing of the items to be purchased. No items are to be added or substituted without prior approval. Such approval can only be provided by Canton Public School District at 601-859-2341.

The Canton Public School District is not financially responsible for any goods ordered or services rendered in absence of an approved purchase order. Thank you for serving the faculty, staff and students of Canton Public School District.

Respectfully,

Tony Foster

Tony Foster
Director of Business and Finance
Canton Public School District

"Perseverance Conquers All"

403 East Lincoln Street • Canton, MS 39046
Phone: 601-859-1152 • Fax: 601-859-4023
www.cantonschools.net



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403 EAST LINCOLN STREET

CANTON, MS. 39046

VENDOR CERTIFICATION

By signing below, I certify that I have received a copy of the District's purchasing procedures (see attached "NOTICE") and will comply to the same as a condition to remain or become an active vendor.

You may email the original of this form to: shawaniagreene@cantonschools.net, or by mail attention to: Shawania Greene at the address listed above or fax a copy to 601-859-5559.

Company name

Name and Title (Please Print)

Signature

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Date: _____

To: (Please Print Below) Company's Name, Mailing & Remittance Address:

Company Name: _____

Mailing Address: _____

Remittance Address _____

Telephone Number (____) _____

Fax Number (____) _____

From: Shawania Greene, Accounting Assistant
shawaniagreene@cantonschools.net

In Order to establish your company as a new vendor, as requested
by _____ (School/Department), the
following information must be submitted:

1. A Copy of your Business License (if applicable):
2. The number of years established.
3. Tax Identification Number and Social Security Number.
4. Completed W-9 form
5. Certificate of Liability (if applicable)
6. One (1) business reference listing their complete mailing address & telephone number:

Phone: _____

7. Vendor certification form completed and signed.

Requested item(s) for purchase _____

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VENDOR AUTHORIZATION AGREEMENT FOR ACH PAYMENTS

I (we) hereby authorize Canton Public School District, hereinafter to initiate automatic credit entries, and if necessary, to initiate automatic debit entries* for adjustments for any credit entries in error to my (our) account identified below, and the financial institution named below to credit and/or debit the same to such account.

FINANCIAL INSTITUTION

Financial Institution: _____

Branch – if applicable: _____

Address: _____

Routing Number**:

Account Number**:

Telephone Number: _____

This authorization is to remain in full force and effect until Canton Public School District has received written notification of its termination in such manner as to afford Canton Public School District and the Financial Institution a reasonable opportunity to act on it.

VENDOR INFORMATION

Vendor Name: _____

Vendor Address: _____

Email (Required): _____

Fax Number: _____ Phone Number: _____

Signature: _____ Date: _____

*Any funds adjustments may be made on subsequent automated transaction

** Please attach a voided check (not a deposit slip) for your account to be used for verification

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