



EWING BOARD OF EDUCATION
Vendor Request Form

| NEW VENDOR | |
|---|---|
| Vendor Name: | Vendor Type: |
| Address (1): | Phone: |
| Address (2): | Fax: |
| City, State: | Email: |
| Zip: | Website: |
| Vendor Remit Address | |
| Payor Name: | |
| Address (1): | |
| Address (2): | |
| City, State, Zip: | |
| Required Vendor Information | |
| W-9 – FEIN# | |
| NJ Business Registration Certificate | |
| Vendor Signed Purchasing Acknowledgement | |
| Political Disclosure Form (if applicable) | Affirmative Action Certificate |
| State Contract # (if applicable) | Prohibited Russia-Belarus Activity & Iran Activity |
| Approval: | |

Signature:

Date:

Send to Tarita Cross – Business Department

Entered in Systems