



Fairbanks North Star Borough School District Substitute W-9 / Vendor Registration/Maintenance Form

Complete and return via email, fax, or US Mail to:

FNSBSD Purchasing Dept., 520 5th Ave., Fairbanks, AK 99701

Email form to: purchasing@k12northstar.org -or- Fax to: (907) 451-4465

Questions: Call (907) 452-2000 x11341

***Required information -Needed to issue payment for products, services, or reimbursements.**

1. Legal Name* as reported on income tax forms
2. Business Name (DBA "Doing Business As" name, if different from #1 above)

4. Address* - Remit address (the address where the payment check should be mailed)				
Remit Name (must match banking info):				
Street or PO Box				
City:		State		Zip
Contact Information*:				
Phone#		Ext.		Fax
Email:				

→ **Payment by Electronic Fund Transfer (EFT) is now available: [EFT ENROLLMENT FORM](#)**

Part I	
5. Taxpayer Identification Number* - Social Security Number (SSN) or Employer Id Number (EIN)	
If you are a Business , enter EIN:	-
If you are an Individual or a Sole Proprietor , enter SSN or EIN:	- -
Do you have Employees? ☐ Yes ☐ No	

6. Address for placing Orders (if different from #4 above)				
Street or PO Box				
City:		State		Zip
Phone#		Ext.		Fax
Email:				

7. Address for IRS income tax form 1099 (if different from #4 above) (Required for Vendors that are paid \$600 or more per year, for services only)				
Street or PO Box				
City:		State		Zip

3. Tax Classification/Type*
(Check only one)
☐ Individual
☐ Sole Proprietor
☐ LLC - Single Owner Corp.
☐ LLC - Partnership
☐ LLC - Corporation
☐ C Corporation
☐ S Corporation
☐ Partnership
☐ Trust/estate
☐ Government Entity
☐ Non-Profit Entity
☐ Other - specify: _____
We supply; (select all that apply):
☐ Goods
☐ Services
☐ Veteran/Minority/Woman/Small Enterprise
Specify: _____



Vendor Self Service
(VSS) Info Here

VSS provides access to the following:

- Payment Status and 1099 Data
- Purchase Orders and Invoice Records
- Bid Solicitation and Commodity Registration

Part II	
8. Certification*	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number, AND	
2. I am not subject to back up 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 back up 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.	
3. I am a U.S. citizen or other U.S. person (including a US resident alien).	
Sign Here	Signature*: _____
Date*:	_____