

EDGEMONT UNION FREE SCHOOL DISTRICT
NEW VENDOR FORM

ROUTING SEQUENCE <input type="checkbox"/> Administrator <input type="checkbox"/> Mimi Southard <input type="checkbox"/> Liz Longinetti
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Instructions: Complete the table below to add a new vendor to our vendor file. **All submissions must include a copy of the vendor's W-9 Form.** Secure an administrator's signature and forward a physical copy to Liz Longinetti in the Business Office.

VENDOR NAME	
ADDRESS	
CITY, STATE, ZIP	
CONTACT NAME (IF APPLICABLE)	
PHONE #	
FAX #	
EMAIL	

REQUESTED BY: _____ DATE: _____

Note: The submitter will receive an email confirmation of the addition to the vendor file, with the new vendor number.

ADMINISTRATOR APPROVAL AND ATTESTATION

Approved Attestation that W-9 Form is Included

SIGNATURE: _____ DATE: _____

FOR BUSINESS OFFICE USE ONLY Assigned Vendor ID #: _____ Entered in nVision's Vendor File on Date: _____
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