# Vendor Registration Form

## General Information

**Vendor Legal Name:**

- ☒ New
- ☐ Change
- ☐ Add New Site

**Trade Name (Doing Business As):**

- Vendor Code:

**Provider of:**
- ☐ Goods
- ☐ Services
- ☐ Goods/Services

**If Services, type of service provided:** Product Services

**Type of Organization (check only one):**

- ☐ Individual – US citizen or US permanent resident (“green card”)
- ☐ Individual – Non-US citizen or Non-US permanent resident (“foreign”)
- ☐ Sole Proprietorship
- ☐ Partnership (US)
- ☐ Corporation
- ☐ Government Agency

**Non-US Corporation:**
- ☐ Partnership (US)
- ☐ Corporation
- ☐ Government Agency

## Vendor Contact Information

### Mail Payments to: ACH/Wire

<table>
<thead>
<tr>
<th>Line 1:</th>
<th>Line 1:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 2:</td>
<td>Line 2:</td>
</tr>
<tr>
<td>City/State/Zip:</td>
<td>City/State/Zip:</td>
</tr>
<tr>
<td>Country:</td>
<td>USA</td>
</tr>
</tbody>
</table>

### Business Address: (if different from payment address)

<table>
<thead>
<tr>
<th>Line 1:</th>
<th>Line 1:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 2:</td>
<td>Line 2:</td>
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</tr>
<tr>
<td>Country:</td>
<td>USA</td>
</tr>
</tbody>
</table>

### Contact Information:

**Acct. Rec. - Name:**

- Phone:
- Email:

**Customer Serv. - Name:**

- Phone:
- Email:

**Sale/Other – Name:**

- Phone:
- Email:

**URL (Web Address):**

**Country of Permanent Resident (for Non-US payees):**

### Notes/Special Instructions:

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## Vendor Authorization

**Printed Name:** Genevia Cook

**Title:** Office Support Specialist

**Date:**

**Signature:**

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### For Procurement Only

**Printed Name:**

**Title:**

**Date:**

**Telephone:**

**Area:**

**Email:**

**Note:** The requestor and the Authorizer cannot be the same person.

### Procurement Authorization

**Printed Name:**

**Title:**

**Date:**

**Signature:**

**Authorizer:** I certify that I have reviewed this request, have found it in compliance with GLWA policies and procedures and hereby authorize this request.