

REQUEST FOR SUPPLIER TO BE ADDED TO VENDOR LIST

Please mail or fax completed forms to:

Attention: _____
School: _____
Address: _____
City, State Zip: _____
Fax: _____

Please be advised that Montgomery County Board of Education requires the issuance and approval of purchase orders for all goods and services. Please do not accept orders without an approved purchase order. Any vendor that accepts an order without a purchase order does so at their own risk.

ENTIRE FORM MUST BE COMPLETED ALONG WITH A COMPLETED W-9 FORM

Supplier Name _____

ORDER Address: _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Contact Person: _____ Title: _____

List your Federal Tax ID or Social Security# _____

Are you providing services or goods

REMIT Address: _____

City: _____ State _____ Zip _____

I certify that all information supplied herein is correct.

Authorized signature _____ Title _____

*** FOR SCHOOL OR DEPARTMENT USE ONLY – PLEASE COMPLETE***	
Name of school or department & individual requesting that this supplier be added.	
_____	_____
School / Department	Individual's Name
BOARD NEXTGEN <input type="checkbox"/> OR LOCAL SCHOOL NEXTGEN <input type="checkbox"/>	