

# VENDOR INFORMATION SHEET

Vendor Name \_\_\_\_\_

\*\*\*How do you want Purchase Orders delivered? (Check One)  Fax  Email  US Mail

Company Phone Number \_\_\_\_\_

Company Fax Number \_\_\_\_\_

Company E-mail Address \_\_\_\_\_

Company URL (Company Website) \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

Contact Phone Number \_\_\_\_\_ Contact Fax Number \_\_\_\_\_

Contact E-Mail Address \_\_\_\_\_

A/R Contact Name \_\_\_\_\_ A/R Contact Phone Number \_\_\_\_\_

\*\*\*How do you want payment remitted?

Check Remittance Address \_\_\_\_\_

ACH  
(Direct Pay) Name of Bank \_\_\_\_\_

\*\*Attached Direct Deposit Form Must be Completed\*\*

Please include the following forms:

Required Forms

Vendor Information Form

W-9 Form

Optional Forms

Direct Deposit Form (If applicable)

Vendor Bid Form (If applicable)

\*\*\*Please notify us immediately of any change.

It is the sole responsibility of the above named vendor to keep all information accurate and up to date.

**Please Return All Completed Forms :**

Alpine School District Purchasing Dept.

Attn: Lori Adams

490 North State St

Lindon, Utah 84042-1340

801-610-8045 (Office)

801-796-3116 (Fax)

Lcadams@alpinedistrict.org

Purchasing Only:

Vendor Number:  
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