



WILSON COUNTY SCHOOLS VENDOR INFORMATION PACKET

In compliance with Federal laws, Wilson County Schools requests the following information regarding your Taxpayer Identification Number (TIN), Federal Identification Number (FID), or Social Security Number (SSN). If we do not receive your correct identification number, Federal law requires that we withhold 31% of amounts due to you and forward these amounts withheld to the IRS until we receive your correct identification number. In addition, you may be subject to certain other penalties from the IRS. Please complete all of the requested information on the back of this form. Incomplete forms will cause unnecessary delays on orders. ***This information must be received before we will process your order for payment.*** If you have any questions, please call the Finance Department at 252-399-7735 or 252-399-7720. Thank you for your cooperation!

Please return this form to:

ACCOUNTS PAYABLE DEPARTMENT
WILSON COUNTY SCHOOLS
P O BOX 2048
WILSON, NC 27894-2048

SCHOOL/LOCATION USE ONLY
SCH/SITE NAME _____

NEW VENDOR INFORMATION SHEET

VENDOR / INDIVIDUAL NAME: _____

FEDERAL TAX ID NUMBER

OR

SOCIAL SECURITY NUMBER

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LEGAL / BUSINESS STATUS (CHECK ONLY ONE)

CORPORATION

GOVERNMENT AGENCY

PARTNERSHIP

COLLEGE / UNIVERSITY / SCHOOL SYSTEM

INDIVIDUAL

NON PROFIT

TRUST / ESTATE

SOLE PROPRIETOR

BUSINESS INFORMATION

TYPE OF BUSINESS:

TYPE OF SALES:

MINORITY OWNED

MERCHANDISE (GOODS ONLY)

PRIZES / AWARDS

FEMALE OWNED

SERVICE ONLY

ROYALTIES

DISABLED OWNED

MERCHANDISE & SERVICES

RENTAL / LEASE

NONE OF THE ABOVE

ATTORNEY / LEGAL FEES

CONSULTANT / PROFESSIONAL FEES

MEDICAL / HEALTH CARE PAYMENTS

YES NO ARE YOU A STATE CONTRACT VENDOR WITH THE NORTH CAROLINA DEPARTMENT OF PURCHASING & CONTRACT ?

REPORTING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ FAX# _____

I CERTIFY UNDER PENALTY OF PERJURY THAT THE TAX ID NUMBER AND OTHER RELEVANT INFORMATION PROVIDED IS CORRECT.

SIGNATURE _____ TITLE _____

DATE _____

A/P DEPT ONLY

VENDOR# _____

DATE _____