



Morehouse College Purchasing Department

Vendor Application

Vendor Name: _____ Contact Name: _____

Phone: _____ Fax: _____

E-mail: _____

ID Number (Federal ID Number or Social Security Number): _____

Purchase Order Address: _____

Accounts Payable Address (if different from above): _____

Nature of Organization: Proprietorship Owner's Name: _____

Partnership Owner's Name: _____

Corporation _____

Independent Contractor _____

Government Agency _____

Other – Specify _____

Type of Service or Product Provided: _____

Vendor Application Checklist:

- Completed Vendor Application
- W-9 Form

Consultant Application Checklist:

- Completed Vendor Application
- Completed Consultant Form
- W-9 Form

By submitting this application, I do hereby solemnly swear or affirm that the information given above is current and true to the best of my knowledge and is in no way misleading. Furthermore, should any data change in the future, I will ensure that correct information will immediately be submitted to the Morehouse College Purchasing Department. I also fully understand and accept the policy that "Morehouse College is not responsible for the payment of any invoice(s) unless an approved purchase order has been issued prior to the delivery of any goods or services."

Signed: _____ Principal/Officer Title: _____

Date: _____

For Purchasing Department Use Only

Vendor Approved: _____ Vendor No.: _____ Date: _____