

Athens State University Vendor Form

Part I Taxpayer Information

Name (as shown on your income tax return)	Exemptions (if any)	
	Exempt payee code	
Doing Business As (if different from above)	Exemption from FATCA reporting code	

Address	
City, State, ZIP Code	

Check only one appropriate box for federal tax classification

Individual/Sole Proprietor	C Corporation	S Corporation	Partnership	Trust/Estate
LLC Single Member	LLC C Corporation	LLC S Corporation	LLC Partnership	Government
Other				

Taxpayer Identification Number	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me);
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person; and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

Signature _____ Date _____

Part II Vendor Information

Check appropriate business type (if any)

<input type="checkbox"/> Woman-Owned	<input type="checkbox"/> Minority-Owned	<input type="checkbox"/> Veteran-Owned	<input type="checkbox"/> Disadvantaged-Owned
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Check appropriate Alabama Retirement System Status (if any)

<input type="checkbox"/> I am currently an active employee in the ERS or TRS	<input type="checkbox"/> I am currently a retired employee in the ERS or TRS
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Contact Person _____	Email Address _____
Phone Number _____	Fax Number _____
Purchase Order Address _____	Remittance Address _____

I have read, certify, and agree to the following:

- Neither I nor a direct family member has a conflict of interest with Athens State University.
- Purchase order must be received prior to purchasing materials or providing service or payment will not be made.
- Purchase order number must be referenced on invoice sent to Athens State University.
- I understand payment terms are Net 30 days (unless otherwise agreed upon or negotiated).
- I have reviewed the Vendor Disclosure Act of 2001-955 requiring disclosure statement for proposals, bids, and contracts in excess of \$5,000. I understand all required documents must be submitted before payment can be made.

Signature _____ Date _____