



School District of the City of Pontiac

47200 Woodward Avenue • Pontiac, MI 48342.2243 • 248.451.6800

Vendor Setup Request Form

(Please complete this form and return to the Business Office with a signed copy of the Vendor's W-9 Form)

SUPPLIER APPLICATION

VENDOR LEGAL NAME: _____

VENDOR CONTACT _____ PHONE: _____

WEBSITE: WWW. _____ FAX: () _____

VENDOR TYPE: (please check one) Individual Corporation Partnership

TAX IDENTIFICATION or SOCIAL SECURITY NUMBER (Circle One): _____
If SSN; submit a copy of your driver's license with this form.

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

REMITTANCE ADDRESS (where payments should be mailed if electronic payment are not accepted):

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

BANKING INFORMATION FOR ELECTRONIC PAYMENTS:

NAME OF BANK: _____ BANK ROUTING # _____

BANK ACCOUNT # _____ TYPE OF ACCOUNT: Checking Savings

I hereby authorize the School District of the City of Pontiac to make deposits in the account identified above using the account information listed on this form. This authorization will remain in effect until written notice of termination is given to the School District of the City of Pontiac's Business Office.

SIGNATURE: _____ Date: _____

NAME (please print or type): _____ Title: _____

Pontiac School District Use Only

Requestor Name: _____ Date: _____

Reason for Request/Comments: _____

Superintendent's Signature: _____

Business Office Use Only

Date: _____

SAM

LARS

VCC/VCM Number: _____

Vendor Number: _____



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FAMILIAL DISCLOSURE STATEMENT

(Return completed form with completed W9 and Vendor Request Form)

The following statement disclosing any familial relationship that exists between the owner or any employee of the vendor and any member of the School District of the City of Pontiac Board or the School District of the City of Pontiac Superintendent shall be obtained with any new vendor. Form W9 vendor requests without this disclosure statement will not be accepted.

The members of the School District of the City of Pontiac Board are: William Carrington, **Brenda Carter, Mike McGuinness, Dubrae Newman, Kerry Tolbert, Carol Turpin, Sherman Williams II**, and the School District of the City of Pontiac Superintendent is **Kelley Williams**.

The following are the familial relationship(s):

<u>Owner/Employee Name</u>	<u>Related to:</u>	<u>Relationship</u>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____

Attach additional pages if necessary to disclose all familial relationships.

or

There is no familial relationship that exists between the owner or any employee of the vendor and any member of the School District of the City of Pontiac Board, or the School District of the City of Pontiac Superintendent.

The undersigned, the owner or authorized representative of Vendor does hereby represent and warrant that the disclosure statements herein contained are true.

Print Name

Signature of Vendor Representative

Title

Date