

VENDOR SETUP FORM

Name			
BU Address (Purchase order address)			
	Street#	City	State Zip
BI Address (AP remit to address)			
	Street#	City	State Zip
Phone #			
FED ID or SOCIAL SEC # (SETUP CANNOT BE COMPLETED WITHOUT)			
VENDOR TYPE	Corporation		
	Sole Proprietor		
	1099 Service		
	Employee		
	Student		
	Please mark all that apply		
Submitted by:		Ext:	
Comments:			