



New Vendor Information

Western Washington
University Accounting Services
360.650.6633

Instructions

This form is to be completed by the vendor.

Fax the following completed forms to: **Confidential Fax# 360.650.4666**

1. Vendor Information Form
2. Completed [W-9 Form](#) (required)
3. Direct Deposit Form (if selected direct deposit as payment option)

To better protect your information you can submit via our secure WWU Vendor Web form, https://esign.wvu.edu/forms/Accounting/_vendor_rec_maint_req_4.aspx.

Questions? Call WWU Accounting Services at 360.650.6633 or contact the person who provided you this form.

Vendor Request

New Vendor

Current Vendor – requesting to update vendor information

Vendor Identification

Vendor Name (legal business name): _____

Doing Business As (DBA): _____

Federal Tax Id#: _____ UBI# (WA State Business License): _____

Vendor Primary/Sales Person Contact

Name: _____

Position Title: _____

Email: _____

Phone: _____

Vendor Customer Service Contact (if different from Primary Contact above)

Name: _____

Email: _____

Phone: _____

Purchase Order Information

Purchase Order (PO) will be sent to your email address:

Email Address (**required**): _____

Mailing Address: _____

City: _____

State: _____

Postal Code: _____

Payment Information

Check/Payment is to be sent to (select one):

Send check/payment via US Mail to the address below:

Attention: _____

Address: _____

City/State/Zip: _____

Send via direct deposit (DD) to bank listed on the enclosed WWU Direct Deposit Form.

Vendor email address to send DD payment confirmation: _____

Attestation

I hereby attest that the above information is true and accurate to the best of my knowledge.

Print Name: _____

Signature: _____ Date: _____