

STATE OF OHIO - OFFICE OF BUDGET & MANAGEMENT

NEW VENDOR INFORMATION FORM

(Replaces the old CAS VENE Form)

ALL parts of this form must be completed by the vendor and returned to the issuing state agency

READ & COMPLE	TE CAREFULLY	☐ NEW	☐ W-9 AT1	TACHED (RE	QUIRED)					
SECTION 1: COMPLETE VENDOR LEGAL BUSINESS NAME (Should match W-9)										
Business Name, Trade Name, Doing Business As: (If different from above)										
BUSINESS ENTITY:	CORPORATION	☐ PAR	RTNERSHIP	SOLE PROF	PRIETOR					
(Please check one only)	NON PROFIT		IVIDUAL	OTHER (SP	ECIFY):					
NOTE: IF SOLE PROPRIETOR, INDIVIDUAL'S NAME (AS OWNER) MUST APPEAR IN THE LEGAL BUSINESS NAME ABOVE										
TAXPAYER ID # (TIN):	SSN	FEI	N	#	_					
SECTION 2: VENDOR ADDRESS:	STREET	CITY	COUNTY	STATE	ZIP CODE	COUNTRY				
CONTACT INFORMATION:	NAME (TYPE OR PRINT)									
VENDOR WEBSITE:										
VENDOR E-MAIL ADDRESS	:	to a control of the								
BUSINESS PHONE & Ext #:										
FAX NUMBER & Ext #:										
IS YOUR BUSINESS CURRENTLY CERTIFIED AS MBE (Minority Business Enterprise) EDGE (Encouraging Diversity, Growth & Equity)										
PAYMENT TERMS: (Pick on	e only) 2/10 Net 30	■ Net 30	Net 45	Net 60	Net 90					
SECTION 3: REMITTANCE INFORMATION: INDICATE BELOW THE REMITTANCE ADDRESS OF YOUR BUSINESS SAME AS VENDOR ADDRESS ABOVE EFT (Electronic Funds Transfer)										
REMIT ADDRESS	STREE	Т	CITY	STAT	E	ZIP CODE				
NOTE: If EFT, must complete Form OBM-1234-(Rev.5/2007) Authorization for Direct Deposit of State Warrants										

SECTION 4: FOR PURCHASE ORDER (PO) DISTRIBUTION: 1) CHECK ONLY ONE BOX BELOW; EMAIL FAX	2) INPUT EMAIL ADDRESS OR FAX# (IF CHECKED) USPS MAIL					
NAME OF PERSON TO RECEIVE PO Distribution:	PHONE NUMBER:	E-MAIL ADDRESS:				
TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM:	PHONE NUMBER:					
SIGNATURE:						
ADD ADDITIONAL BUSINESS ADDRESS, E-MAIL & CONTACT INFORMATION ON SEPARATE SHEET IF REQUIRED						
PLEASE SEND COMPLETED FORM & QUESTIONS ABOUT THE FORM TO THE AGENCY CONTACT (information listed below):						
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PLEASE SEND COMPLETED FORM & QUESTIONS ABOUT THE FORM TO THE AGENCY CONTACT INFORMATION:	CONTACT (information list	ed below):				
	CONTACT (information list	ed below):				
AGENCY CONTACT INFORMATION:	CONTACT (information list	ed below):				
AGENCY CONTACT INFORMATION: Contact Name:	CONTACT (information list	ed below):				
AGENCY CONTACT INFORMATION: Contact Name: Contact Phone:	CONTACT (information list	ed below):				
AGENCY CONTACT INFORMATION: Contact Name: Contact Phone:	CONTACT (information list	ed below):				

(Rev. November 2005) Department of the Treasury Internal Revenue Service

Request for Taxpayer **Identification Number and Certification**

Give form to the requester. Do not send to the IRS.

page 2							
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r type	Check appropriate box: Individual/ Corporation Partnership Other	>	C	Exempt withhole	from bac	kup	
Print o	Address (number, street, and apt. or suite no.)		er's name and address (optional) State Univ Attn: A/P Dept.				
Decific	City, state, and ZIP code		P.O. Box 1004 Wilberforce, OH 45384				
List account number(s) here (optional)							
Part I Taxpayer Identification Number (TIN)							
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.							
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.			ployer identi	fication nu	ımber		
Part II Certification							
Und	er penalties of perjury, I certify that:						
1.	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), and						
- 1	I am not subject to backup withholding because: (a) I am exempt from backup withholding, Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to rep notified me that I am no longer subject to backup withholding, and						
3. I	3. I am a U.S. person (including a U.S. resident alien).						
with	tification instructions. You must cross out item 2 above if you have been notified by the If holding because you have failed to report all interest and dividends on your tax return. For mortgage interest paid acquisition or abandonment of secured property, capacillation of do	real estate trans	actions, iter	n 2 does	not appl	y.	

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. (See the instructions on page 4.)

Here

Signature of U.S. person ▶

Date ▶

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

- U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:
- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States.
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,