

BLOOM TOWNSHIP HIGH SCHOOL DISTRICT 206

NEW VENDOR FORM

Date:

To: Alicia Evans, Business Manager/CSBO

From:

Re: New Vendor

NOTE: This form must be completed thoroughly by a District 206 employee

Vendor Name _____

Vendor Address _____

Vendor Phone _____

Vendor Email and Website _____

What type of service will the vendor provide?

Are there existing vendors who would be used for the same purpose? If yes, please explain the need for this additional provider.

Is Vendor certified as a Minority/Women Business Enterprise "MWBE"? ___ Yes ___ No

If Yes, provide **CERTIFICATION #** _____.

Why did you choose this vendor?

How will this expenditure be paid? Please circle Local Specify if grant _____

What is the expected annual expense for this vendor? \$ _____

If the vendor is a service provider (object 300 series) you must attach a completed IRS Form W-9.

Building Administrator's signature: _____