

VENDOR REGISTRATION FORM

Legal Name:				_
Trade Name (DBA):				_
Mail Purchase Orders to:			Mail Payments to:	
Telephone #				
Fax#				
Employer Identificatio	n#			
Type of Organization	☐ Partners ☐ Incorpor ☐ Nonprofi	prietorship		
Business Classif	ication Type	☐ Small Bus: ☐ Minority (☐ Women Own)	iness Owned Business	
Commodities				_
Authorized Signature		_	Title	
Typed Name		_	Date	

Revised 01/15