Arkansas State University Vendor Information Request Form

Arkansas State University would like to request information to establish your business as a vendor. The information requested is necessary not only to maintain an accurate vendor file, but also to comply with the Internal Revenue Service Regulations. Federal law stipulates that each payee furnish an accurate Federal Tax Identification Number to the payer.

Please complete the appropriate fields below:

Phone Number:	Fax Number:
mail Address:	Web site:
elect the appropriate ownership of business type(s)	s): Select the appropriate category for tax purposes:
African American	US Citizen
American Indian	Legal Permanent Resident (Green Card)
Asian American	Nonresident Alien
Caucasian	US Entity
Disabled Veteran	Foreign Entity
Hispanic American	Does your company qualify as a minority business enterprise
Pacific Islander	according to the State of Arkansas definition?
Veteran	"Minority business enterprise" means a business that is at leas 51% owned by one or more minority persons.
Woman	Yes No
Order Address:	
Address:	County:
City:	State: Zip Code:
Nation:	
Payment Address:	
Address:	County:
City:	State: Zip Code:
Nation:	
mportant: In order to expedite any current or future or V-9 (US Citizen, LPR) V-8BEN (Foreign Individuals) V-8BENE (Foreign Entities) F	order, please fax required forms to 870-972-3834. Procurement Services

(870) 972-2028