



Paso Robles Joint Unified School District SUPPLIER DIRECTORY FORM

SUPPLIER NAME (required)

Business Name: _____

Name on W9 Form: _____

Taxpayer EIN or SSN: _____

Does your company have a parent company? If yes, please list: _____

EIN of Parent Company: _____

Please list other company names or affiliates doing business with us under a different name:

BUSINESS CONTACTS

Sales Contact: _____ phone: _____ fax: _____ email: _____

Order Desk: _____ phone: _____ fax: _____ email: _____

Accounts Receivable: _____ phone: _____ fax: _____ email: _____

Business Address: _____ city: _____ state: _____ zip code: _____

Web/url addresss: _____

Remit Address (if different from Business Address): _____ city: _____

state: _____ zip code: _____ Web/url addresss: _____

Type of product or service provided: _____

Supplier signature (required): _____

print name & title: _____ date: _____

Attach completed W9 and mail to: PRJUSD – Purchasing Department, 2900 Union Road, Paso Robles, CA 93446

Your signature authorizes us to provide contact information of approved vendors for specific purchases or services. Otherwise, PRJUSD does not under any circumstances sell, market, or share your information with any other parties or agencies unless it's required by law.