

## Dear Vendor:

Please take a moment to help us ensure the accuracy of our records and the expedition of payments by completing the information section below and filling out the W-9. Both forms are **required** documents for LSCPA's Accounts Payable processing. Also, make sure the tax classification you enter on the Vendor Information Sheet matches the tax classification on the W-9.

Company Name		Contact Name
Telephone Number		Fax Number
Email Addre	ess of Accounts Receivable	· <del>·············</del>
Taxpayer Ide	entification Number (TIN)	
Address		Remit to Address
Federal Tax	Classification: (Mark One)	
	Individual/sole proprietor (suppl	y Owner's name and SS# below) REQUIRED
	Owner	SS#
	Partnership (supply partners' na	mes and SS#'s below <b><u>REQUIRED</u></b>
	Name	
	Name	SS#
	C-Corporation	
	S-Corporation	
	Trust/Estate	
	Limited Liability Company. Enter S=S Corporation,	the tax classification ( C=C Corporation, P= Partnership)
	Other	
If you are a	corporation, please check below whi	ch one applies:
	Non-Texas Corporation	
	Texas Corporation (Charter Num	ber REQUIRED)

Your assistance is greatly appreciated. You may fax the completed form to (409) 984-6011 or email to veltzmr@lamarpa.edu. If you should have any questions, please contact Maureen Veltz at (409) 984-6119.

Thank you.