

## Request for Vendor Information

Any individual or entity paid by Corgan is considered a supply vendor. Vendors must complete this form and IRS form W-9 prior to payment being issued. Information provided on this form is subject to verification, including, but not limited to, IRS Tax Identification Number (TIN) Matching. If request relates to an update or a modification, please only complete the applicable section(s).

### Section 1: Vendor Information

**Vendor Name** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Contact Name** \_\_\_\_\_ **Email** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Primary Specialty** \_\_\_\_\_

### Section 2: Payment Information

**Payment Reference**     ACH Payment     Paper Check     Payment remittance is different than above

**ABA Routing Number** \_\_\_\_\_ **Account Number** \_\_\_\_\_

**Name of Bank** \_\_\_\_\_

**Remittance Advice Email** \_\_\_\_\_

**Remittance Address** \_\_\_\_\_

### Section 3: Taxpayer ID and Certification \*\*\* Required for payment \*\*\* Attach W-9 \*\*\*

**Corporation**                    -- - - - -

**Individual/Sole Proprietorship**    -- - - - -

**Corporation**                    -- - - - -

**Section 4: Socio-Economic Status**

Based on primary North American Industry Classification System (NAICS) MCC Codes, check all that apply:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Large Business, Non-DBE, Non-M/WBE                     | <input type="checkbox"/> Women-Owned Business               | <input type="checkbox"/> HUB Zone Certified                              |
| <input type="checkbox"/> Minority and/or Women-Owned Business Enterprise (MWBE) | <input type="checkbox"/> Minority Business Enterprise (MBE) | <input type="checkbox"/> JWOD Non-Profit Organization                    |
| <input type="checkbox"/> Small Business Enterprise (SBE)                        | <input type="checkbox"/> African-American                   | <input type="checkbox"/> Historically Black College                      |
| <input type="checkbox"/> Disadvantaged Business Enterprise (DBE)                | <input type="checkbox"/> Hispanic                           | <input type="checkbox"/> U.S. Government Agency                          |
| <input type="checkbox"/> Non-Profit Organization*                               | <input type="checkbox"/> Asian                              | <input type="checkbox"/> Veteran   |
| <input type="checkbox"/> Foreign-Owned Business**                               | <input type="checkbox"/> Native American                    | <input type="checkbox"/> Service Disabled Veteran                        |
|   |   | <input type="checkbox"/> Texas Historically Underutilized Business (HUB) |
- \*Provide Tax Exempt Certification  
\*\*attach W8

**Other** (indicate) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If certified, please answer the following (if applicable)**

**Agency of Certification** \_\_\_\_\_  
**Certification Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Signature of Company Representative**

**Printed Name** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Email** \_\_\_\_\_  
**Signature** \_\_\_\_\_

Return completed forms to:  
[vendors@corgan.com](mailto:vendors@corgan.com)  
Fax: 214 744 4342

**Corgan**  
ATTN: Accounting  
401 North Houston Street  
Dallas, Texas 75202