



GOOSE CREEK CONSOLIDATED INDEPENDENT SCHOOL DISTRICT
PURCHASING DEPARTMENT

VENDOR INFORMATION PACKET

Vendors wishing to do business with the Goose Creek CISD must complete this form in its entirety. Upon receipt of completed forms, the Purchasing Department will retain vendor information and notify you of any upcoming bid/proposal opportunities. *Vendors will be added to the District's financial system and issued a vendor number only if the need for the goods/services offered arises.*

New Vendor

Vendor Update

Vendor Name: _____

Business Name on Invoices (if different than above): _____

Tax Identification Number: _____ Social Security Number Federal Identification Number

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Fax Number:** _____

Remit To Address: _____

City: _____ **State:** _____ **Zip:** _____

Company Website: _____

SALES CONTACT

Representative: _____

Phone Number: _____

ACCOUNTS RECEIVABLE CONTACT

Representative: _____

Phone Number: _____

CONTACT INFO FOR SENDING BID NOTIFICATIONS

Email Address: _____

Fax Number: _____

CONTACT INFO FOR SENDING PURCHASE ORDERS

Email Address: _____

Fax Number: _____

Please select any Purchasing Cooperatives your company has been awarded a contract with:

- | | | | |
|---|--|--|------------------------------------|
| <input type="checkbox"/> BuyBoard | <input type="checkbox"/> Choice Partners | <input type="checkbox"/> DIR | <input type="checkbox"/> HGAC |
| <input type="checkbox"/> MRPC | <input type="checkbox"/> NJPA | <input type="checkbox"/> PACE | <input type="checkbox"/> PSA |
| <input type="checkbox"/> Region 5 | <input type="checkbox"/> Region 9 | <input type="checkbox"/> Region 19 (ASC) | <input type="checkbox"/> Region 20 |
| <input type="checkbox"/> State of Texas | <input type="checkbox"/> TCPN | <input type="checkbox"/> TIPS | |
| <input type="checkbox"/> Other: _____ | | | |

Please select the commodities you offer:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Accounting/Auditing Svcs. | <input type="checkbox"/> Computer Accessories & Supplies | <input type="checkbox"/> Health & Nurse Supplies/Equip./Svcs. | <input type="checkbox"/> Playground Equip. |
| <input type="checkbox"/> Alarm (Fire) Equip./Maint./Svcs. | <input type="checkbox"/> Computer Hardware & Peripherals | <input type="checkbox"/> Hotel/Lodging | <input type="checkbox"/> Plumbing Supplies/Svcs. |
| <input type="checkbox"/> Alarm (Security) Equip./Maint./Svcs. | <input type="checkbox"/> Consulting Svcs. | <input type="checkbox"/> Instructional Materials | <input type="checkbox"/> Postage Machines/Supplies |
| <input type="checkbox"/> Appraisal Svcs. | <input type="checkbox"/> Contracted Svcs. | <input type="checkbox"/> Insurance | <input type="checkbox"/> Printers & Supplies |
| <input type="checkbox"/> Architectural/Engineering Svcs. | <input type="checkbox"/> Copier Equip./Supplies/ Svcs. | <input type="checkbox"/> Internet Provider | <input type="checkbox"/> Printing Svcs. |
| <input type="checkbox"/> Armored Vehicle Svcs. | <input type="checkbox"/> Cosmetology Supplies/Equip | <input type="checkbox"/> Janitorial Supplies/ Svcs. | <input type="checkbox"/> Professional Organizations |
| <input type="checkbox"/> Art Supplies/Equip. | <input type="checkbox"/> Custodial Supplies/Equip/ Svcs. | <input type="checkbox"/> Job Order Contracting | <input type="checkbox"/> Promotional Items/Incentives |
| <input type="checkbox"/> Arts & Crafts Supplies/Equip. | <input type="checkbox"/> Delivery/Shipping Svcs. | <input type="checkbox"/> Kitchen Equip/Maint./Svcs. | <input type="checkbox"/> Public Safety/Police Suppl./ Equip./Svcs. |
| <input type="checkbox"/> Asbestos Abatement | <input type="checkbox"/> Dry Cleaning | <input type="checkbox"/> Land Surveyors | <input type="checkbox"/> Radio/Telephone Equip. |
| <input type="checkbox"/> Athletic Flooring (Indoor & Outdoor) | <input type="checkbox"/> Election Workers | <input type="checkbox"/> Laundry/Clothing Alteration | <input type="checkbox"/> Reading Materials (print/ebooks/mag.) |
| <input type="checkbox"/> Athletic Officials | <input type="checkbox"/> Electrical Supplies/Repair | <input type="checkbox"/> Legal Svcs. | <input type="checkbox"/> Registration/Training (workshops) |
| <input type="checkbox"/> Athletic Supplies/ Equip. | <input type="checkbox"/> Equipment Rental | <input type="checkbox"/> Library Books/Supplies/Svcs. | <input type="checkbox"/> Special Needs Supplies/Equip./Svcs. |
| <input type="checkbox"/> Audio Visual Equip/ Supplies | <input type="checkbox"/> Facility Rental | <input type="checkbox"/> Maintenance Supplies/Repair | <input type="checkbox"/> Spirit Wear (Embroidery/Screen Print) |
| <input type="checkbox"/> Automotive Parts/Supplies/Svcs. | <input type="checkbox"/> Field Trips | <input type="checkbox"/> Medical Svcs. | <input type="checkbox"/> Student Tournament/Competition Fees |
| <input type="checkbox"/> Awards/ Trophies/Medals/Ribbons, etc. | <input type="checkbox"/> Financial Institution Svcs. | <input type="checkbox"/> Membership Dues | <input type="checkbox"/> Telecommunication Equip./Supplies |
| <input type="checkbox"/> Booster Club | <input type="checkbox"/> Floor Coverings | <input type="checkbox"/> Moving/Storage Svcs. | <input type="checkbox"/> Telephone Svcs./Supplies |
| <input type="checkbox"/> Building Maint./Repair Svcs. | <input type="checkbox"/> Florist | <input type="checkbox"/> Music Instrument Repair/ Maint. | <input type="checkbox"/> Testing Materials/Svcs. |
| <input type="checkbox"/> Building Materials/Supplies | <input type="checkbox"/> Food Services Management | <input type="checkbox"/> Music Instruments/Equip./ Supplies | <input type="checkbox"/> Theater Costume/Makeup/Props/ Suppl. |
| <input type="checkbox"/> Bus Repair Parts/Supplies/Svcs. | <input type="checkbox"/> Fuel/Gas/Oil | <input type="checkbox"/> Newspaper Advertising | <input type="checkbox"/> Travel Svcs. |
| <input type="checkbox"/> Cabling Svcs. | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Newspaper/Magazine Subscriptions | <input type="checkbox"/> Uniforms (Grounds/Maint.) |
| <input type="checkbox"/> Cafeteria Furniture | <input type="checkbox"/> Furniture (Classroom/Library) | <input type="checkbox"/> Office Equip/Supplies | <input type="checkbox"/> Uniforms (Police/Security) |
| <input type="checkbox"/> Catering Svcs./Restaurants | <input type="checkbox"/> Furniture (Office) | <input type="checkbox"/> Paint Supplies/Svcs. | <input type="checkbox"/> Uniforms (Student Groups/Athletics) |
| <input type="checkbox"/> Charter Bus Svcs. | <input type="checkbox"/> General Contractor | <input type="checkbox"/> Paper & Paper Goods | <input type="checkbox"/> Utility Provider |
| <input type="checkbox"/> Chemical Products/Svcs. | <input type="checkbox"/> Government Entity | <input type="checkbox"/> Party Rentals | <input type="checkbox"/> Vehicle Rental |
| <input type="checkbox"/> Classroom Supplies | <input type="checkbox"/> Grocery/Food Products | <input type="checkbox"/> Permits/Fees/Dues | <input type="checkbox"/> Vehicles (New/Used) |
| <input type="checkbox"/> Clothing/Apparel | <input type="checkbox"/> Grounds Equip., Supplies/Repair | <input type="checkbox"/> Photography/Video Svcs. | <input type="checkbox"/> Wrecker/Towing Svcs. |
| <input type="checkbox"/> Computer Software/Site Licenses | <input type="checkbox"/> HVAC Equip./Maint./Svcs. | <input type="checkbox"/> Other: _____ | |

PLEASE RETURN FORMS TO THE DISTRICT EMPLOYEE WHO REQUESTED THAT YOU COMPLETE THIS PACKET.

If you are not dealing directly with a GCCISD employee, fax completed forms to (281) 421-3392 or email to purchasing@gccisd.net.

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional) GOOSE CREEK CISD PO BOX 30 BAYTOWN, TX 77522
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.