

# VENDOR VERIFICATION FORM

Nixa Public Schools  
301 S. Main St.  
Nixa, MO 65714  
Phone 417-875-5400  
Fax 417-449-3190

**Must complete and mail to address above  
in order to be added to approved vendor list.**

Legal Name of Company (as recorded with the IRS) \_\_\_\_\_  
Owners/Partners of Company \_\_\_\_\_  
Physical Address \_\_\_\_\_ City / State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City / State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Business Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Years in Business \_\_\_\_\_ Incorporated: Yes \_\_\_\_\_ No \_\_\_\_\_  
Type of Merchandise/Service Business Provides \_\_\_\_\_

Are you or a family member employed by Nixa Public Schools? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, name of employee \_\_\_\_\_ Relationship: \_\_\_\_\_  
Will Accept Purchase Orders \_\_\_\_\_ Yes \_\_\_\_\_ No  
Will Accept MasterCard \_\_\_\_\_ Yes \_\_\_\_\_ No

Per IRS regulations, the District must have a W-9 on file for every vendor. YOU WILL NOT BE ADDED TO THE NIXA PUBLIC SCHOOLS APPROVED VENDOR LIST WITHOUT W-9 INFORMATION. A copy of the Form W-9 is available on the IRS website at <http://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=3>

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Tax Identification Number

\_\_\_\_\_ Social Security Number OR

\_\_\_\_\_ Employer Tax Identification Number



## **To Be Completed by Nixa Public Schools Business Office**

Date Received \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved

Verification Completed By \_\_\_\_\_ Date \_\_\_\_\_