



Roswell Independent School District

Vendor Set Up Request

****W-9 IS REQUIRED****

R.I.S.D. Requester Use Only

NAME OF REQUESTER:

PHONE:

DATE:

WHAT WILL THIS VENDOR BE USED FOR:

IS THE VENDOR AN RISD EMPLOYEE, OR A MEMBER OF AN EMPLOYEES IMMEDIATE FAMILY?

YES

NO

RISD EMPLOYEE NAME:

RELATION:

VENDOR NAME:

TAX PAYER ID#:

COMPANY ADDRESS:

STREET:

CITY:

STATE:

ZIP:

CONTACT NAME:

PHONE:

EMAIL:

FAX:

REMIT TO ADDRESS:

STREET:

CITY:

STATE:

ZIP:

CONTACT NAME:

PHONE:

EMAIL:

FAX:

*******Every Vendor Set Up Request MUST be submitted with a signed W-9*******

FAX: 627-2534

For questions, please contact Monica Wright at Ext. 2540

or e-mail MWright@risd.k12.nm.us