



As a current or potential vendor with Florida State College at Jacksonville, we appreciate your firm's commitment to the College and the goods and services you provide.

In an effort to become more efficient, the College has embarked on a major project to update our administrative software system that will benefit both the College and our vendors. On or about July 1, 2015, Florida State College at Jacksonville will be going live with this new administrative software system.

In order to make sure the information contained in our vendor file is correct and up to date, we are requesting all vendors re-register (even if you are currently a vendor with FSCJ) **prior to June 1, 2015**.

Please be advised that there are two forms to be completed to continue to be listed in the Florida State College at Jacksonville vendor file.

Form 1 (accounts payable) is to be used by the College's accounts payable department to streamline payment of all College invoices. The College would prefer to make all such payments by ACH where possible. If you do not currently accept ACH payment, please indicate on the form what method of payment you will require. Be aware any payment other than ACH may cause a delay in your receipt of payment. To register, email your completed Form 1 (accounts payable form) to Ms. Eileen Shammo at emshammo@fscj.edu or mail to Florida State College at Jacksonville, Accounts Payable, 501 W. State Street, Jacksonville, FL 32202, Attention: Ms. Eileen Shammo.

Form 2 (purchasing vendor application) is used by the College's purchasing department for both issuing future direct purchase orders and solicitations. In our efforts to go paperless, **all purchase orders will be emailed from the new system** (please use/create a generic company email box for these purchase orders to route to. Caution: please do not use an employee or staff member's email box to reduce future maintenance due to turnover). To register, please either complete the attached **Form 2** or access this link <http://www.fscj.edu/discover-fscj/gov-admin/purchasing/vendor-application/>, complete the **vendor application** (which includes a W-9 form) and submit electronically to Ms. Patty Carter at pcarter@fscj.edu or mail to Florida State College at Jacksonville, Purchasing Department, 501 W. State Street, Jacksonville, FL 32202, Attention: Patty Carter. Once we receive your current information, you will be imputed as a vendor into our new system database.

We hope you will take the time to respond to this request, as we value our relationship with your company. Only vendors who respond to this request will be registered as FSCJ vendor when we go live with our new system in July. If you would like to continue to be a registered vendor, and do business with FSCJ, you will need to complete this registration process.

If you have any questions concerning Form 1 Accounts Payable, please contact Ms. Eileen Shammo at (904) 632-3349. For the purchasing vendor application, please contact Ms. Patty Carter at (904) 632-3303.

Thank you for your assistance.

Dennis Blank
Executive Director: Purchasing and Auxiliary Services

Authorization Agreement for Direct Deposits (ACH) for Vendor Payments

Action: START CHANGE CANCEL

PAYEE/AGENCY INFORMATION (Required)

Company/ Individual Name: _____

Contact Name: _____ Federal Tax ID #: _____

Street Address/ P.O. Box: _____

City: _____ State: _____ Zip+4: _____ - _____

Phone: _____ Fax: _____ Email: _____

If your remittance address is different from your mailing address, please use the space below to provide your remit to address. It is necessary that this section be filled out completely.

Vendor's Remit to Mailing Address (include zip code):

Company/ Individual Name: _____

Street Address/ P.O. Box: _____

City: _____ State: _____ Zip+4: _____ - _____

Financial Information – Please Print

Account Name: _____ Bank Name: _____

Routing Number: _____ Account Number: _____

Type of Account: Checking Savings Remittance Email: _____

DIRECT DEPOSIT AUTHORIZATION AGREEMENT

This form authorizes Florida State College at Jacksonville (FSCJ) to initiate direct deposits of funds to the account and finance institution indicated above. I acknowledge that the origination of ACH (Automatic Clearing House) transactions to the account indicated above will comply with the provisions of US law.

I understand that:

- It is my responsibility to provide correct bank routing/account numbers and to verify payments have been credited to my account. **Florida State College at Jacksonville assumes no liability for overdrafts for any reason.**
- In the event my financial institution is not able to deposit any transfer to my account, Florida State College at Jacksonville cannot issue the funds to me until said funds are returned by my financial institution.
- This authorization will override any previous authorization and will remain in effect until: a) revoked by my written request; or b) notification is sent by my bank that the account number is no longer valid.
- The only notification to me of the ACH deposits will be by e-mail and it is my responsibility to provide an active e-mail address and to update this address as needed.

Print Name of Authorized signature: _____ Date: _____

Signature: _____ Title: _____

Submit Form:
Any Campus Business Affairs Office

Mail Form:
Florida State College at Jacksonville
Attn: Accounts Payable-Eileen Shammo
501 W. State Street, Room 306
Jacksonville, FL 32202

Email:
Emshammo@fscj.edu

Form 2 Purchasing Vendor Application

Mailing Address

Company Name: _____
 Attention: _____
 Suite #: _____
 PO Box: _____
 Street Address: _____
 City: _____ State: _____ Zip+4 _____ - _____

In our efforts to go paperless, it is the College's intent to email all purchase orders to our vendors from the new system. Please use/create a generic company email box for these purchase orders to route to. Caution: please do not use an employee or staff member's email box to reduce future maintenance due to turnover.

Email address for submitting purchase orders: _____

Federal Tax ID # _____ Contact Name: _____
 Telephone #: _____ Fax: _____

Disadvantage Business Designation: If women or minority owned, please check the appropriate minority group.

<input type="checkbox"/>	M1 Black Male	<input type="checkbox"/>	M9 Black American Women
<input type="checkbox"/>	M2 Hispanic American	<input type="checkbox"/>	S1 Small Business Concern
<input type="checkbox"/>	M3 Asian American	<input type="checkbox"/>	S2 Small Business Disadvantage
<input type="checkbox"/>	M4 Native American	<input type="checkbox"/>	S3 Historically Underutilized Business Zone (HUD Zone)
<input type="checkbox"/>	M5 Native Hawaiian	<input type="checkbox"/>	S4 Veteran Owned
<input type="checkbox"/>	M6 Small Business	<input type="checkbox"/>	S5 Service Disabled Veteran Owned
<input type="checkbox"/>	M7 Disabled	<input type="checkbox"/>	NM Not Minority
<input type="checkbox"/>	M8 American Women		

Enclosed completed and signed attached W-9 Form: Yes ___ No ___

Please submit this form to:

Patty Carter
 Florida State College at Jacksonville
 Purchasing, Room 305
 501 W. State Street
 Jacksonville, FL 32202
 Or via email to pcarter@fscj.edu

 Company Name

 Signature

Request for Taxpayer Identification Number and Certification

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

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:		4		
	Individual/sole proprietor or single-member LLC	C Corporation		S Corporation	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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	Partnership				
	Trust/estate				
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.				
	Other (see instructions) *				
5	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)			
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.

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.

Social security number									
OR									
Employer identification number									

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.

Florida State College at Jacksonville is a member of the Florida College System and is not affiliated with any other public or private university or college in Florida or elsewhere.

Florida State College at Jacksonville does not discriminate against any person on the basis of race, disability, color, ethnicity, national origin, religion, gender, age, sex, sexual orientation/expression, marital status, veteran status, or genetic information in its programs or activities. Inquiries regarding the non-discrimination policies may be directed to the College's Equity Officer, 501 West State Street, Jacksonville, Florida 32202 | (904) 632-3221 | equityofficer@fsci.edu.

Florida State College at Jacksonville is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the baccalaureate and associate degree. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, or call (404) 679-4500 for questions about the accreditation of Florida State College at Jacksonville. The Commission is to be contacted only if there is evidence that appears to support an institution's significant non-compliance with a requirement or standard.