

Supplier Account Form

PLEASE COMPLETE USING ALL CAPS

Section 1: Supplier Information

Supplier's Legal Name

Tax ID Number (TIN/EIN/SSN)

(Please enter number only without dashes)

Supplier Primary Phone #

(Please enter number only without dashes)

Street Address

City/Town

State

Zip Code

Remit Payments To (if different from physical address; Optional):

Alternate Street Address

Alternate City/Town

Alternate State

Alternate Zip Code

Section 2: Tax Reporting Information

1099 Reportable

Make sure to select the appropriate reportable status to avoid year-end 1099 reporting and filing issues.

Tax Recipient Type

Section 3: Supplier Contact

Supplier First Name

Supplier Last Name

Supplier Email

Supplier Phone #

(Please enter number only without dashes)

ACH Payments (Optional)

ACH Bank Name

(Bank should be in USA only, and currency in US Dollars only)

ACH Account Number

ACH Bank Routing #

(Please enter number only, without dashes. e.g. 111111111)