



13220 Doyle Path E., Rosemount, MN 55068  
Email: ap@spectroalloys.com

## Vendor Information Record

Full Legal Name: \_\_\_\_\_

1099 Reporting Name (if different): \_\_\_\_\_

**Physical** Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

☐ Check here if remittance address is the same as physical address.

**Remittance** Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

Accounting Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Description of goods and/or services sold: \_\_\_\_\_

Please enter your taxpayer identification number on the appropriate line below. For individuals and sole proprietors, this is your social security number. For other entities, it is your employer identification number.

Federal ID #: \_\_\_\_\_ - \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Please check one of the following:

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_ Other \_\_\_\_\_

Certification:

Under penalties of perjury, I certify that: The number shown on this form is my correct taxpayer identification number.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **For Spectro Use Only:**

Terms: \_\_\_\_\_ Spectro Alloys Contact: \_\_\_\_\_

New Vendor: ☐ Update Physical Address: ☐ Update Remittance Address: ☐

Supplier Class: \_\_\_\_\_ Web-site verified: ☐ FEIN look-up: ☐

Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

Vendor Account #: \_\_\_\_\_ Date Completed: \_\_\_\_\_ Completed By: \_\_\_\_\_