



Prescott Unified School District #1

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VENDOR REGISTRATION APPLICATION/BIDDER LIST APPLICATION

Please mail or FAX the completed Vendor Registration/Bidder List Form and W9 form*.

Company name: _____
Address: _____
City, state, zip code: _____
Contact name: _____
Phone: _____ Fax: _____
E-mail address: _____
Fed ID#: _____
Today's date: ____/____/____

Company Line of Business (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Architectural/engineer services | <input type="checkbox"/> Laundry |
| <input type="checkbox"/> Art supplies | <input type="checkbox"/> Legal services |
| <input type="checkbox"/> Auditing services | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Nurse supplies |
| <input type="checkbox"/> Computer cabling | <input type="checkbox"/> Office supplies |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Paper supplies |
| <input type="checkbox"/> Consulting services | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Educational materials/software | <input type="checkbox"/> Printing/stationery |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Student insurance |
| <input type="checkbox"/> Fire alarm/equipment | <input type="checkbox"/> Telephone/intercom |
| <input type="checkbox"/> Food services | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> General school supplies | <input type="checkbox"/> Variety store |
| <input type="checkbox"/> HVAC | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Janitorial | _____ |
| <input type="checkbox"/> Insurance | |

Please provide a brief description of the products and/or services provided by your company: _____

*Must include Form W-9 Request for Taxpayer Identification Number and Certification

(Checkbox indicating that Form W-9 was sent.)