

Vendor Name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Country/Other: _____

Phone: _____

Order Processing Email(s): _____ A/R Email(s): _____

Contact Name(s): _____

Federal Tax ID: _____

(required) Must attached W-9. International Vendors must attach W-8.

Estimated Annual Purchases: \$ _____

(required)

Payment Terms: _____ Explanation: _____

(terms other than the default Net 60 require written explanation)

Items/services to be purchased: _____

For Powerex Use Only:

Originator

Purchasing Manager/Supervisor

Controller (required)