

**Tax Reporting Name** \_\_\_\_\_

Name shown on income tax return

**Company Name** \_\_\_\_\_

If applicable, DBA name for checks

**Federal Tax Identification Number** \_\_\_\_\_

Employer Identification Number

OR

Social Security Number

**Type of Business**


Corporation

Sole Proprietor

Partnership

LLC \_\_\_\_\_ (classification)

**Order form Information** (Information for Obtaining Quotes/Purchase Order Submission)

Street/PO Box \_\_\_\_\_

City \_\_\_\_\_

State/Zip \_\_\_\_\_

Contact Person Name/Title \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Website \_\_\_\_\_

**Payment Address**


Same as Above

Street/PO Box \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Contact Person Name \_\_\_\_\_

Title \_\_\_\_\_

Email Address \_\_\_\_\_

Website \_\_\_\_\_

**Minority Business Status**

Check all that apply to your organization

African American (person having origins in any of the black racial groups of the African Diaspora, regardless of cultural origin)

Hispanic American (person of Spanish or Portuguese culture with origins in Spain, Portugal, Mexico, South America, Central America, or the Caribbean, regardless of race)

Asian American (person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands, including the Hawaiian Islands before 1778)

Native American (person who has origins in any of the Indian Tribes of North America before 1835)

American Woman

**Ability to Conduct Business**

 Is your organization legally able to conduct business with public entities in the State of Florida, pursuant to Florida Statute 287.133, and with the Federal Government as per epls.gov?  No  Yes

 At the present time, or at any time in the last twelve months, has any owner, officer, stockholder, employee or other person with an interest either directly or indirectly with your company been employed by Pensacola State College?  No  Yes

 I certify that the information supplied herein is correct to the best of my knowledge. I further certify that in doing business with Pensacola State College my firm is in compliance with Chapter 112.313, Florida Statutes, relating to conflict of interest ([www.flsenate.gov/Statutes/](http://www.flsenate.gov/Statutes/)). I agree to the Purchase Order Terms and Conditions of Pensacola State College.

 \_\_\_\_\_  
 Authorized Signature

 \_\_\_\_\_  
 Name and Title

 \_\_\_\_\_  
 Date