Miccourt Ctata			Updated 5/01/2024		
Missouri State Vendor Regist	tration	Form and	Substitute W-9		
UNIVERSITY		Vendor ID in	Banner (office use only):		
New Vendor Vendor Update Doing business with			Department		
Are you an employee or related to an employee of the University?	YES or N	0			
If YES, state relationship					
Company/Individual Name on IRS Record					
Company DBA Name -					
Payments will be made payable to this name					
Contact Name	_				
[PR/PO]Primary Business Address/Purchase Order Information	Phone		Fax		
(PO Box or Street, City, State, 9-Digit Zip)	E-Mail Address and/or Company Website				
			T_		
[RE]Remit To Information If different from above. Mailing address for checks & 1099 rptg	Phone		Fax		
(PO Box or Street, City, State, 9-Digit Zip)	E-Mail A	ddress			
IRS Tax Classification (Check all that apply)	Check all that apply: If certified, please attach copy of certification with this form				
[IS]Individual/Sole Proprietor or Single-member LLC					
[CP] Corporation (C or S) [PR] Partnership	[SM] Small business/Small Disadvantaged Bus.				
[LL] Limited Liability Entity. MUST choose one of the following:	[WO] Woman-Owned Business Enterprise (WBE) [MN] Minority-Owned Business Enterprise (MBE)				
(C=C corporation, S=S corporation, P=Partnership)	[MO] Missouri Certified (MBE / WBE / DBE)				
Note: Do not check LLC if the LLC is classified as a single-member LLC that is	[VO] Veteran-Owned/Disabled Veteran Small Bus.				
disregarded from the owner unless the owner of the LLC is another LLC that is not					
disregarded from the owner for U.S. federal tax purposes.	Select Income Type, if applicable:				
[OT]Other Not for Profit Government Entity Trust/estate	[MD] Physician or Medical/Health Provider				
Select if you maintain a regular place of business in the state of Missouri [MF] Missouri Firm	[AT] Attorney or Legal Firm [FB] Missouri Non-Resident Entertainer as				
Determined by (office use only): University Dept:	Staff Initials:				
Part I: Taxpayer Identification Number (TIN)		Stair initials	··		
Enter your TIN in the appropriate box. The TIN provided must match the name above to avoid backt	ap withholdir	ng. For individuals, this	is your social security number (SSN).		
For other entities, it is your employer identification number (EIN).	•				
Social Security Number (SSN) Employer Ider Number (EIN					
Part II: Certification: Under penalties of perjury, I certify that:	<i>)</i>		// // // // // // // // // // // // // 		
1. The number shown on this form is my correct taxpayer identification number (or	I am waitir	g for a number to be	issued to me), and		
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal					
Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has					
notified me that I am no longer subject to backup withholding, and					
3. I am a U.S. citizen or other U.S. person (and authorized to sign an IRS Form W-9) Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because					
you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or					
abandonment of secured property, cancellation of debt, contributions to an individual retirement account (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.					
For additional information refer to the website link below: www.irs.gov and go to Form W-9					
Signature of U.S. Person:		Date:			
Printed Name:	Title:				

VISA PAYABLES ENROLLMENT FORM

PAYMENT TENDER: Missouri State University's preferred method of payment is by Visa Credit Card. Adoption of this method will provide suppliers with the following benefits.

- 1. Accelerated payment and improved cash flow.
- 2. Reduced paperwork and streamlined accounts receivables process.
- 3. Real-time notifications for each card payment.
- 4. No changes or modifications to your existing card acceptance procedures.

What to expect when signing up for our Visa Payables program:

- 1. You will receive 2 emails from notifications@visapayablesautomation.com
 - a. Notice of security question, which is your company's Zip. The same Zip entered in the remittance address section below.
 - b. Email providing you with the zip code on file with Visa Payables.
- 2. When MSU is ready to process a payment, you will receive an automated remittance notification:
 - a. Click the link in the email.
 - b. Provide last 4 of card account: listed in the email.
 - c. Provide your 5 digit zip code entered below.
 - d. The website will provide you with the full 16 digit card number.
- 3. You may retain this 16 digit card number in a secure location for future payments from Missouri State University.

Company Name:					
Remittance Address:					
City	State	Zip			
Acc	counts Receivable Depar	tment Information			
Name:	Title:	Title:			
Phone:	Email:	Email:			
Payment Notification Email:					
This email will receive notice when I	Missouri State University has made բ	payments and the credit card on file can	be processed.		
CVV2 Required	YES	NO			
v	e right hands when the customer is n equire this value to be entered.	le shown on the back of a Visa card lets of present during the transaction. The state	upplier's		
By signing this fo	orm, you are authorizing Missouri State	University to pay invoices by credit card.			