



**PATTONVILLE SCHOOL DISTRICT**  
**PURCHASING DEPARTMENT**

**VENDOR REGISTRATION PACKET**

**Instructions**

1. Vendors requesting to be placed on the Purchasing Department's Official Bid List are required to complete this packet. This packet includes a Vendor Registration Form, Category List and W-9 Form.

These forms must be signed and dated by an authorized representative.

Completing this packet is not a guarantee of future business with the District, but will provide the Vendor an opportunity to participate in the competitive bid process.

2. The vendor will be responsible for updating information as needed. The Vendor Registration Packet must be updated and resubmitted every two (2) years or as needed in order to remain an active bidder. If there is no activity (profile updates and bid responses) on a vendor's registration over a 24 month period, the profile may be purged. It is the responsibility of the Vendor to see that the information provided is current and accurate. Any corrections or updates to any Vendor's file must be made by completing another Vendor Registration Packet.
3. Complete all documents and submit documents to the Purchasing Department by fax, email or mail. All documents must be legible.

MAIL: Pattonville School District  
Attn: Mary Ann Brann  
11097 St. Charles Rock Road  
St. Ann, MO 63074

FAX: 314-213-8636

EMAIL: [mbrann@psdr3.org](mailto:mbrann@psdr3.org)

4. Questions regarding this registration process should be directed to the Purchasing Department at 314-213-8036.



## VENDOR REGISTRATION FORM

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Federal ID or Social Security Number \_\_\_\_\_  FEIN  SSN

### **ADDRESS TO WHICH BID REQUESTS ARE TO BE MAILED/EMAILED**

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

City, State, Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

### **ADDRESS TO WHICH PURCHASE ORDERS ARE TO BE MAILED/EMAILED**

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

City, State, Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

### **REMITTANCE ADDRESS**

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

City, State, Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_



## VENDOR REGISTRATION FORM (Cont'd)

Does your company accept credit card payment?  YES  NO

**Collusive Bidding:** Any VENDOR that submits more than one proposal in such a manner as to make it appear that one of the proposals submitted is competitive with that of a different VENDOR, or any two or more Vendors that agree to fix their respective proposals in such a manner as to be awarded a bid shall be disqualified from further consideration and shall be subject to any applicable penalties under the law.

**Bribery:** Any VENDOR that attempts to influence a District official to award a contract to such VENDOR by promising to provide or by providing to such District official any gratuity, entertainment, commission or any other gift, in exchange for a promise to award the contract to such VENDOR shall be disqualified from further consideration and shall be subject to any applicable penalties under the law.

**Conflict of Interest:** Any VENDOR that knows of any District official having a material direct or indirect financial interest in such VENDOR shall be required to submit a written statement detailing such interest. Failure to disclose such a known financial interest shall result in the VENDOR's disqualification from further consideration as to be setup.

By signing below the Vendor has verified that all information is correct and has read and understands the statements about Collusion, Bribery and Conflict of Interest.

### Authorized Representative

Printed Name: \_\_\_\_\_ Title \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

NOTE: The attached Vendor Registration Category List and W-9 must be completed and accompany the Vendor Registration Form in order to be included on the Official District Bid List.

