

Supplier Information Packet

You must include your IRS Form W-9 with this packet. The W-9 must be filled out completely, signed, and include either a Social Security Number (SSN) or Employer Identification Number (EIN) but not both.

Company Information

Company Name _____

Contact Phone _____ Website _____

Mailing Address* _____

*if different than the address on your W-9

Purchase Orders

Purchase Orders are emailed automatically by our procurement system.

Purchase Order Email _____

Payments

Payments are sent by check unless ACH is requested

Accounts Receivable Email _____

Remittance Address* _____

*If different than mailing address above

Minority-Owned Business Status

Complete this section if your company is at least 51% owned and managed by any of the following:

Black / African American Hispanic / Latino Asian / Pacific Islander

Indigenous / Native American Veteran Woman

If your company is certified as a Florida -based woman -, veteran -, and minority -owned small business (CBE), include a copy of your certificate with this packet. To become a certified CBE, see the Office of Supplier Development (OSD)

General Terms for Doing Business with SF

PURCHASE ORDERS: All purchases originating from SF must either be 1) accompanied by a purchase order signed by the Director of Purchasing, or 2) paid for with a valid SF procurement card. Any purchase made without an approved purchase order or valid procurement card shall be considered unauthorized. Such purchases are non-binding to the college.

INVOICES: Email invoices to accountspayable@sfcollge.edu. All invoices must include a purchase order number, contact name, remittance address, email, and phone number. Payment terms are considered to be Net 30 unless otherwise agreed upon. Suppliers are encouraged to provide discount terms on invoices.

SALES TAX: S anta Fe College is exempt from all state and federal sales tax. A copy of our tax exemption certificate is available upon request.

CONFLICT OF INTEREST NOTICE: Doing business with SF is subject to the provisions of Chapter 112, Florida Statutes. All suppliers must disclose the name of any officer, director, or agent who is also an employee of Santa Fe College. Suppliers must disclose the name of any c

State of Florida
Affidavit Regarding the Use of Coercion for Labor and Services

Respondent Vendor _____

Vendor FEIN _____

Vendor Address _____

City _____ State ____ ZIP _____

Phone _____ Email _____

Vendor's Authorized Representative Name and Title

[Section 787.06\(13\), Florida Statutes](#) requires all nongovernmental entities executing, renewing, or extending a contract with a governmental entity to provide an affidavit signed by an officer or representative of the nongovernmental entity under penalty of perjury that the nongovernmental entity does not use coercion for labor or services as defined in that statute.

As the person authorized to sign on behalf of Respondent, I certify that the company identified does not:

- Use or threaten to use physical force against any person;
- Restrain, isolate, or confine or threaten to restrain, isolate, or confine any person without lawful authority and against her or his will;
- Use lending or other credit methods to establish a debt by any person when labor or services are pledged as a security for the debt, if the value of the labor or services as reasonably assessed is not applied toward the liquidation of the debt, the length and nature of the labor or services are not respectively limited and defined;
- Destroy, conceal, remove, confiscate, withhold, or possess any actual or purported passport, visa, or other immigration document, or any other actual or purported government identification document, of any person;
- Cause or threaten to cause financial harm to any person;
- Entice or lure any person by fraud or deceit; or
- Provide a controlled substance as outlined in Schedule I or Schedule II of s. 893.03 to any person for the purpose of exploitation of that person.

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

By:

AUTHORIZED SIGNATURE _____

Print Name and Title _____