

# Supplier Maintenance Form

PLEASE PRINT CLEARLY

Ministry _____ Authorized by _____	Date (dd/mth/yy) _____ Prepared by _____ Phone _____
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Site Uses:

Pay/Purchasing	Purchasing Only
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<p><b>Operating Unit: (Must check one)</b></p> <p>Primary _____</p> <p>Other _____ (Operating Unit Name)</p> <p><b>Purpose: Check all that apply:</b></p> <p>New Supplier _____</p> <p>New Supplier Site _____</p> <p>Reactivate Supplier _____</p> <p>Change Name _____</p> <p>Change Address _____</p> <p>Change Classification _____</p> <p>Change Site Use _____</p>	<p><b>Classification: (Must check one)</b></p> <p>Board Member/Tax Reporting _____</p> <p>Ministry Entity _____</p> <p>Employee _____ (Future Number)</p> <p>Federal Government _____</p> <p>Sask. Government Entity _____</p> <p>Supplier _____</p> <p>Transfer/Grant Recipient _____</p>	<p>Supplier Name: _____</p> <p>Supplier Number: _____</p> <p>Supplier Site: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Province/State: _____ Postal Code/ZIP _____</p> <p>Country: _____</p>
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<p><b>Communication (Purchasing Only)</b></p> <p>Phone _____ Ext _____</p> <p>Fax _____ Email _____</p>	<p>Tax Registration Number for Board Members/Tax Reporting only: _____</p>
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<p><b>Department Verification: Process Used</b></p> <p>Phoned Supplier _____ Verified By: _____</p> <p>Located Supplier in Phone Book _____ Signature _____</p> <p>Located Supplier on Internet _____</p> <p>On-line Utility (Canada 411 or MySask.com) _____</p> <p>Other _____</p>		<p><b>Central Use Only</b></p> <p>Entered by: _____</p> <p>Date (dd/mth/yy) _____</p>
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