Central Consolidated School District No. 22
VENDOR REQUEST FORM

Thank you for supporting and doing business with Central Consolidated School District. Please read the following information, fill in, sign and date where indicated. After completing the areas undicated please send packet to the CCSD school or department you're working with.

Doing Business with CCSD: The vendor will: a.) not provide any goods or services, including free trials or sample orders, to any CCSD school or department without a signed and approved Purchase Order from CCSD's Procurement Department in hand. CCSD will not make payment for goods or services that are delivered without an approved Purchase Order; b.) upon request by CCSD, provide an itemized written quote that includes item detail, unit costs, shipping costs for goods, and sales tax on services; c.) include the corresponding Purchase Order Number on all invoices submitted to CCSD for payment. The vendor understands that any invoice(s) submitted to CCSD's Accounts Payable Department for payment without the corresponding Purchase Order Number included on the invoice will NOT be paid, and will be returned for correction and resubmitted; and d.) Payment terms, net 30.

Please fill in the following:

Vendor Name: _____ DBA (if applicable): _____
Contact Name: _____ Phone: _____ Fax: _____
Email: _____UEI (Unique Identity ID): _____ NM CRS #: _____
Address for Payment Remittance, if different from the address on your IRS Form W-9.
Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Physical Address If different from the address on your IRS Form W-9
Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Detail of Services: _____

Information on this form and your W-9 is used to set up a vendor in CCSD's financial software and will not automatically make you eligible for electronic notification of bid requests. To register for electronic notification of bid requests, please visit our website at https://ccsdnm.bonfirehub.com/portal/?tab=pastOpportunities. Completion of this form is not a PO number, nor does it mean you are a "preferred vendor" or that you have been formally awarded a contract.

Conflict of Interest: employee or board member of Central Consolidated School District (or close relative) has a direct or indirect financial interest in the vendor or in the proposed transaction, and vendor neither employs, nor is negotiating to employ, any Central Consolidated School District employee, board member or close relative, and vendor did not participate, directly or indirectly, in the preparation of specifications upon which the quote or offer is made, with the exception of person(s) identified below. Fill the form attached listing below the name(s) of any Central Consolidated School District employee, board member or close relative who now or within the preceding 12 months (1) works for the vendor; (2) has an ownership interest in the vendor (other than as an owner of less than 1% of vendor's stock, if vendor is a publicly traded corporation); (3) is a partner, officer, director, trustee or consultant to the vendor; (4) has received grant, travel, honoraria or other similar support from vendor; or (5) has a right to receive royalties from the vendor.

Debarment/Suspension Status: The vendor certifies that it is not suspended, debarred or ineligible from entering into contracts with the Federal Government, or in receipt of a notice or proposed debarment from any agency. The vendor agrees to provide immediate notice to Central Consolidated School District purchasing department buyer in the event of being suspended, debarred or declared ineligible by any department or federal agency, or upon receipt of a notice of proposed debarment that is received after the submission of the quote or offer but prior to the award of the purchase order or contract.

Central Consolidated School District No. 22 PO BOX 1199 Shiprock, New Mexico 87420
(505) 598-5834

CONFLICT OF INTEREST DISCLOSURE FORM

This form must be filed by any prospective contractor whether or not they, their family member or their representative has any family member employed with Central Consolidated School District, within the First degree, Second degree or Third degree to the employee.

Pursuant to Chapter 199, Section 1, of the NMSA 1978 Nepotism; and School Board Policy G0700 Staff Conflict of Interest.

22-5-6 **Nepotism Prohibited**

A. A local superintendent shall not initially employ or approve the initial employment in any capacity of a person who is the spouse, father, father-in-law, mother, mother-in-law, son, son-in-law, daughter, daughter-in-law, brother, brother-in-law, sister, sister-in-law, of a member of the local school board or the local superintendent. The local school board may waive the nepotism rule for family member of a local superintendent.

B. Nothing in this section shall prohibit the continued employment of a person employed on or before July 1, 2009.

Pursuant to **NMAC 1.7.6.8 NEPOTISM:**
No agency shall permit the hiring, promotion, or direct supervision of an employee by a person who is related by blood or marriage within the third degree to the employee. [11-3-90...5-15-96; Rn, 1 NMAC 7.8.10, 7-1-97; 1.7.6.8 NMAC - Rn, 1 NMAC 7.6.8, 11/30/00

“Contract” means any agreement for the procurement of items of tangible personal property, services, professional services, or construction.
“Family Member” means spouse, father, father-in-law, mother, mother-in-law, son, son-in-law, daughter, daughter-in-law, brother, brother-in-law, sister, sister-in-law.
“Person” means any corporation, partnership, individual, joint venture, association of any other private legal entity.
“First Degree” means a close blood relative who includes the individual's parents, full siblings, or children.
“Second Degree” means a blood relative who includes the individual's grandparents, grandchildren, aunts, uncles, nephews, nieces or half-siblings
“Third Degree” means the relative of a person who is a first cousin, great-grandparent or greatgrandchild.

I have read and fully understand that this does not mean that I/We/Company cannot be hired by Central Consolidated Schools or provide goods and services; however, we do acknowledge that we are related to the following board members or administrative personnel at a Director or Principal level or above:

Name: _____ Job Title: _____ Location: _____

Name: _____ Job Title: _____ Location: _____

Name: _____ Job Title: _____ Location: _____

☐ I am NOT related to any board member or administrative personnel at a Director or principal level or above.

Signature: _____ Printed Name: _____

Company Name: _____ Date: _____

Central Consolidated School District
Vendor Acknowledgement

Please read, initial, and sign this form to acknowledge the following CCSD Order and Invoicing policies and procedures. Following these policies and procedures will help ensure prompt payment for your goods and/or services.

_____ Initial

1. **Purchase Orders:** All materials and services purchased MUST HAVE a valid Purchase Order (Signed). Complete PO Terms and Conditions are stated on CCSD website. Vendors shall be responsible for ensuring that no orders are accepted without an authorized CCSD Purchase Order. All Purchase Orders are for one-time purchase and may NOT be reused. Add-ons or changes shall not be accepted by the Vendor after placement of the original order, except when such changes are confirmed on an authorized REVISED Purchased Order issued by the Procurement Department.

_____ Initial

2. Quotes: A quote is not an order, nor a guarantee of an order. Vendors may be requested to provide a quote for goods or services needed by the District. This is an important piece of information and should contain the following:

- Quote Number and Expiration Date (assumed 30 days if not stated otherwise)
- Contact Person and Phone Number
- Product Number, Description, Unit Type, Unit Price, and Quantity
- Tax and Freight (If applicable)
- Total

_____ Initial

3. Taxes: CCSD holds a Class 9 Nontaxable Transaction Certificate and is exempt from payment of taxes on tangible goods. A NTTC will be issued upon request.

_____ Initial

4. Invoicing: All invoices must reference the applicable CCSD Purchase Order. In accordance with NM §13-1-158, the invoice will be paid when services have been rendered or items have been received, have been inspected at the school/department site, and all delivery tickets/invoices have been signed by the appropriate CCSD administrator. Payments are Net 30. Back order items must be invoiced separately. When back orders have been delivered, Vendor will reference the original Purchase Order from which supplies were ordered and further state that "order is complete."

By signing, I acknowledge that failure to comply with CCSD Order and Invoicing polices will be cause for the District to not honor the invoice and impose other remedies available, including but not limited to suspension or debarment.

_____

Vendor / Company Name

_____ _____

Name of Signatory Title

_____ _____

Signature Date

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to *www.irs.gov/FormW9* for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See ***Specific Instructions*** on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

5 Address (number, street, and apt. or suite no.). See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

☐☐☐ – ☐☐ – ☐☐☐☐

or

Employer identification number

☐☐ – ☐☐☐☐☐☐☐

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting 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 (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	**Signature of U.S. person**	**Date**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they