



Vendor Information Sheet

Note: All BOLD fields are required

Please choose which system that the information needs to be setup in:

System Part: _____ CC 01 _____ CC 02 _____ CC 10

Federal Id # (SS or UIN for people) _____

Vendor Name _____

Remittance Address _____

Phone Number _____

Preferred Distribution Method for Aggie Buy (*Pick one email or fax*)

Email: _____ Fax: _____

Funds to be used _____ Local _____ State

Note:

Prepared by:

Name: _____

Phone #: _____

Department: _____

E-mail address: _____