



JACKSON COUNTY CIRCUIT COURT
415 E 12 STREET, ROOM 8ME
KANSAS CITY, MO 64106

SUPPLIER/VENDOR REGISTRATION FORM

*This form is NOT intended for foreign entities

PO#, if applicable _____

PART 1: GENERAL COMPANY INFORMATION

Name (As shown on your IRS income tax return): _____

Business Name (if different from above): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Ext: _____ Fax: _____ Web Address/URL: _____

Contact Name _____ Contact Email: _____

Remit Payment To: (if different from above)

Street Address: _____ City: _____ State: _____ Zip: _____

Phone, with area code: _____ Ext: _____ Fax, with area code: _____

PART 2: REMITTANCE INFORMATION

Do you offer customers a secure, web-based ordering system?..... Yes No

Do you offer customers a secure, web-based invoice retrieval and approval system? Yes No

Jackson County Circuit Court prefers method of payment by VISA credit card. Is this payment acceptable? Yes No

- If yes, provide name of contact person: _____
- Email address of contact person (required): _____

PART 3: PRODUCT/SERVICE TYPE

Type of Good or Service: _____

PART 4: COMPANY DETAILS

Federal Tax ID # _____ Social Security #: _____ Employer ID # _____

Type of ownership: Individual Sole Proprietor Corporation Partnership LLC

Tax classification: *D=Disregard Entity C=Corporation P=Partnership

**If "D" (disregard entity), enter the Social Security # above AND enter the owner's name in Part 1, "Name" above*

Affiliate Non-Profit Subsidiary Other

Federal Tax Exempt: Yes No If yes, indicate the IRS Code Section: _____

Citizenship of Principal: USA Perm Resident Non-Resident Alien US Entity solely owned by foreign entity

For appropriate tax reporting, check all that may apply:

Rental Intellectual Property Healthcare Legal Services Other Services _____

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PART 5: SIGNATURE (Required)

Strike out any language that does not apply.

CERTIFICATION: Under penalties of perjury, I certify that 1) the number shown on this form is my correct T.I.N. 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 IRS that I am subject to backup withholding due to failure to report all interest or dividends or the IRS has notified me that I am no longer subject to backup withholding, and 3) I am a US person (including a US resident alien).

Signature _____ Date _____

If you need help completing this form, contact the office of Court Purchasing at [\(LINK TO 4.4.6\)](#)

NOTE: Do not submit Social Security Number via email; submit via Fax or US Mail

MAIL COMPLETED FORMS TO:

Jackson County Circuit Court
Court Purchasing Department
415 E 12 Street, Room 8ME
Kansas City, MO 64106

OR

FAX TO:

(816) 881-3226

Court Purchasing Use Only	
Buyer Name: _____	Date: _____
Comments: _____	

