

*** This form is for use by MCS staff only ***

One-time or annual purchases will be processed with the PCard, rather than add a vendor. Collect their W-9 and use V# 33642

1. Have you exhausted all efforts to find a vendor listed in WVEIS providing similar services/goods? Yes No
2. This requested vendor provides: Goods Services Both Goods & Services - E.g. Flash drive with print

3. Vendor Category Type (check all that apply): Art/Music Books: Classroom/Library Classroom Curriculum
Counselor Computers Special Education Field Trip Fund Raising Furniture Graduation Other_____
Health Hotel Instructional Library Maintenance Office PhyEd Playground ProfessionalDev
Transporation Safety Science Security Technology Testing Textbooks Software

4. Vendor's Full Name: _____
5. Attention: _____
6. Street Address (Required): _____

PO Box (Optional): _____

7. City: _____

8. State: ___ Zip: _____ - _____

9. Telephone Number: _____ Ext. _____

10. Fax Number: _____

11. Vendor's E-mail Address: _____

12. _____
Administrator's printed name Date

13. _____
Adminstrator's signature Date

MCS staff. Fax completed and signed request form and the current
Form W-9 to Angie Wamsley O: (304) 675-4540 x49133 | F : (304) 675-4116

Follow the link (click on it) to www.irs.gov for a current Form W-9