

**Camden City School District
Purchasing Department
1033 Cambridge Street
Camden, NJ 08105**

All vendors must complete this form and forward this form with a W-9 and Business Registration Certificate to CCSD / Purchasing Department 1033 Cambridge Street., Camden, NJ 08105
(Purchasing@camden.k12.nj.us).

Business Name: _____

Doing Business As Name: _____

Business Address: _____

Business Address 2: _____

City: _____

State: _____

Zip: _____

Business Phone #: _____

Fax #: _____

Website: _____

Email 1: _____

Email 2: _____

Optional Billing Address: _____

City: _____

State: _____

Zip: _____

Additional Phone #: _____

Contact Name: _____

Contact Phone#: _____

Contact Email: _____

Tax Id #: _____

State Contract ID: _____

Employee ID: _____

Office Use Only	
Date Entered: _____	Non-Collusion Affidavit _____
1099 Needed: _____	Bid Bond _____
BRC Received: _____	Consent of Surety _____
W-9 _____	Insurance Certificate _____
Political Disclosure _____	Affirmative Action Cert. _____
Statement of Ownership _____	