Henderson County Pub	lic Schools	
Amanda Jose, Finance Assistan	t	
414 Fourth Avenue West		
Hendersonville, N.C. 28739		
Phone: 828-697-4733	X 7 X X X X X X X X X X	E.
	Vendor Applicati	on Form
Taxpayer Identification Number: (Social security number or Employer identified on the security number of the security	lentification number)	HCPS Employee: Yes No
Vendor Name (as shown on your incor	ne tax return)	
Business Name, if different than above	e	
Check appropriate box: Individua Enter the tax classification (D= disreg		on 「 Partnership 「 Limited Liability Company =partnership)
(Order Address)	(Remit to Address)
Street	Street	
Street	Street	
City	City	
County		
State/Zip Code	State/Zip Code	
Contact Person	Phone Number	
E-Mail Address	Fax Number	
FOR STATE REQUIR	ED REPORTING, PLEA	SE COMPLETE THE FOLLOWING:
MBE Status (Minority Business Enterpri Minority Owned: Black		can American Indian
□ Women Owned	. 1	
Disabled Owned		
 Disabled Business Enterprise Non-Profit Work Center 		
 Non-Profit Work Center Socially and Economically Disadvantaged 		
 None of the Above 	uu fulfuu bou	
Which of the following do you provide t	o Henderson County Public Scho	ols?
ProductsServices		
** Fax completed form to:** (on con Amanda Jose, Finance Assistant Fax: 828-698-4429	npany letterhead) Mail to: or	Henderson County Public Schools 414 Fourth Avenue West Hendersonville, N.C. 28739 Attn: Amanda Jose, Finance
Henderson County Public Schools Use	<u>*</u>	Auto Antanua 5050, Fillance
Is Vendor on any State or Federal Deb		
Federal Yes No		
State Yes No		