



REQUEST FOR NEW VENDOR

TO BE FILLED OUT BY BIRDVILLE ISD PERSONNEL

NEW VENDOR REQUEST CONTACT INFORMATION		
Department/School:	Date of Request:	
Person Requesting the new vendor:		
Phone:	Fax:	E-mail:
What type of funds will be used when purchasing from vendor: <u>example: student activity, campus activity, local monies or grant monies, federal funds</u> <u>Amount of money that you will be spending:</u> <u>Is this vendor an Interlocal Agreement (Buyboard, DIR, TCPN, Etc.)</u>		
[Reason for the new vendor request is required]		
Vendor Name:		
Contact person at company:		
Phone number of vendor:		
Email Address of contact person:		

Email completed page along with all other vendor forms to
bisd.purchasing@birdvilleschools.net