



188 Spear Street, 12<sup>th</sup> Floor  
San Francisco, CA 94105  
Phone: 415-684-7070 Fax: 415-738-0413

## New Vendor Setup Form

\* Required to complete, sign and return to [accounts payable@newrelic.com](mailto:accounts payable@newrelic.com) for payment.

<b>Vendor Information</b>			
Legal or Corporate Name of Business (Personal or Sole Ownership Full Name) <i>Py Ohio, Inc.</i>		Federal Tax ID #: (Please attached W9) <i>45-5316811</i>	
D/B/A Name of Business (if different than above)		Year Established	Length of Ownership
Contact Name <i>Eric Floehr</i>	Business Telephone # <i>614-440-0130</i>	Business Fax #	
D/B/A Mailing Address <i>508 GRACE DR.</i>	City <i>MARYSVILLE</i>	State <i>OH</i>	Zip Code <i>43040</i>
Remittance Address (if different than above)	City	State	Zip Code
E-Mail Address <i>INFO@PYOHIO.ORG</i>	Company Website Address <i>PYOHIO.ORG</i>		
Preferred Method of Payment: <input type="checkbox"/> Company Check <input checked="" type="checkbox"/> ACH/Wire	Payment Term: <input type="checkbox"/> Net 45 <input type="checkbox"/> Net 30 <input type="checkbox"/> Other: <input type="checkbox"/> Net 15 <input checked="" type="checkbox"/> Due Upon Receipt		

<b>Business Type</b>			
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> C Corporation	<input type="checkbox"/> C Corporation	<input type="checkbox"/> Ltd Liability Corp
<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input checked="" type="checkbox"/> Nonprofit Organization	<input type="checkbox"/> Tax Exempt

<b>EFT/ACH/WIRE Instruction:</b>			
Financial Institution Name: <i>PNC Bank</i>		Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Saving	
Financial Institution Address:		City	State    Zip Code
Account Number: <i>4267403296</i>		ABA/Routing# (US Banks) <i>041000124</i>	
Swift Code and/or BIC (International Bank Only)		IBAN (International Bank Only)	
Account Holder's Name (Note Payee Name): <i>PYOHIO, INC</i>			
Account Holder's Address <i>508 GRACE DR</i>		City <i>MARYSVILLE</i>	State <i>OH</i> Zip Code <i>43040</i>

The undersigned agrees to the terms and conditions outlined above and authorize New Relic, Inc. to verify any of the information documented herein.

  
Signature

*ERIC FLOEHR, TREASURER*  
Printed Name    Title

*4/25/14*  
Date