# CHANGES TO EXISTING SUPPLIER

(The completed sections of the template must be affixed within the body of the supplier's company letterhead)

|  |
| --- |
| SUPPLIER NAME (as legally registered/appears on W-9 tax documentation:) |
|  |
| TAXPAYER ID (As provided on W-9 Tax Document) |
|  |

## TYPE OF CHANGE: ADDING AN ADDITIONAL (NEW) ADDRESS

|  |  |
| --- | --- |
| ADDITIONAL (NEW) ADDRESS DETAILS | IF ADDING AN ADDITIONAL PURCHASING ADDRESS, THE ASSOCIATED PAY ADDRESS MUST BE PROVIDED |
| Address Line 1: | Address Line 1: |
| Address Line 2: | Address Line 2: |
| Address Line 3: | Address Line 3: |
| City: | City: |
| County: | County: |
| Province: | Province: |
| State: | State: |
| Postal Code: | Postal Code: |
| Country: | Country: |
| ADDRESS PURPOSE (Check address purpose below) |  |
| \_\_ PURCHASING ADDRESS |  |
| \_\_ PAY ADDRESS |  |
| Definition for 'PURCHASING ADDRESS': For Indirect Suppliers it is the PURCHASE ORDERS MAILING ADDRESS, For Direct suppliers it is the SHIP FROM ADDRESS. | Definition for 'PAY ADDRESS': Remit to address that appears on a supplier's invoice. |
|  |  |
| IF ADDING AN ADDITIONAL PURCHASING ADDRESS, SUPPLIER CONTACT TO RECEIVE PURCHASE ORDERS (POs) | IF ADDING AN ADDITIONAL PAY ADDRESS, SUPPLIER CONTACT TO RECEIVE PAYMENTS |
| First/Last Name: | First/Last Name: |
| Email Address: | Email Address: |
| Phone Number: | Phone Number: |
| Fax Number (If applicable): | Fax Number (If applicable): |

## SIGNATURE

|  |
| --- |
| All pages of the supplier's letterhead and any additional supporting document(s) must be dated (within one year), contain the printed name, job title, eSignature or physical signature (not fancy font) of the supplier's company representative providing the information. |
|  |
| eSignature or Physical Signature: |
| Printed Name: |
| Job Title: |
| Date: |
|  |
| The completed sections of the template must be affixed within the body of the supplier's company letterhead |