

**Idaho State Liquor Dispensary
P.O. Box 179001
1349 E. Beechcraft Court
Boise, Idaho 83717-9001**

NEW AND PROSPECTIVE SUPPLIER INFORMATION SHEET

Instructions: This form is necessary and must be filed with the Idaho State Liquor Dispensary (ISLD) for any new supplier. This form, a W-9, and a standard price quotation must all be returned completed as part of the new product set-up procedure. If any of the forms are not returned, ISLD will be unable to do business with the supplier.

SUPPLIER CORPORATE NAME: _____

EMPLOYER ID NUMBER: _____ (MANDATORY)

SUPPLIER BUSINESS ADDRESS: _____

City: _____ STATE: _____ ZIP: _____

PRINCIPLE CORPORATE OFFICER (S): _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

E-MAIL ADDRESS: _____

PURCHASE ORDER PROCESSOR: _____

ACCOUNTING/ACCOUNTS PAYABLE PERSONNEL: _____

SUBMIT ORDERS TO: _____
(If different than address shown above)

Prepared By: _____

Date Prepared

Return to: Purchasing Department
Idaho State Liquor Dispensary
P.O. Box 179001
Boise, ID 83717-9001