



REQUEST FOR A UNC-CHAPEL HILL W-9 TO BE SENT TO VENDOR

Vendor Name: _____

Attention to: _____

Vendor Address: _____

Vendor Fax: _____

Vendor Email (preferred): _____

Select One

US Mail Information to Vendor: _____

Fax Information to Vendor: _____

Email Information to Vendor: _____

Requestor's Name: _____

University Department: _____

Phone: _____

Email: _____

Department Remit Address: _____

Campus Box: _____

**Email request to Judy LeDoux, Accounts
Payable and Vendor Services:
accountspayable@unc.edu**