

**TDCJ ALL INCLUSIVE VENDOR FORM
INSTRUCTIONS**

Box Number	Required Information
1	Legal Name: Legal business name filed with the IRS. For Sole Ownership or Individual Recipient, excluding LLC, enter name of owner.
2	DBA: Name you are "Doing Business As" if different from legal business name.
3	Tax Information Mailing Address: Address where IRS tax information is sent. (i.e. W9, 1099, etc.)
4	Payment Address: Remit Address for payments if different from address in box 3.
5	<p>Taxpayer Identification: Select the appropriate check box for the taxpayer identification number you are entering. Enter only one number.</p> <p>Social Security: enter your social security number only if you are doing business under your social security number and you report taxes to the IRS using a "DBA" or you are a Sole Proprietor.</p> <p align="center">OR</p> <p>Federal Tax Identification Number: enter the Federal Employee Identification Number (FEIN) assigned to your business by the IRS if this is the number you use to report taxes to the IRS.</p>
6	Federal Tax Classification: Select only one that describes the ownership type of business.
7	State Charter Information: The state where corporation or partnership status is filed and the file or charter number of corporation or partnership in that state.
8	Sole Ownership Info: Name and Social Security Number of Sole Owner (excluding LLC) if using an Employer Identification Number (EIN).
9	Partnership Information: Name and Social Security Number or EIN of all partners involved in the general partnership. Please attach additional sheet if needed.
10	Profit Status: Select only one that describes the profit status of the business.
11	Exemption from Backup Withholding: check this box if the business is exempt from Backup Withholding. For further information on Backup Withholding, see the following IRS Web site: http://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=3
12	Certification: You must cross out item 2 if you have been notified by the IRS that you are currently subject to Backup Withholding because you have failed to report all interest and dividends on your tax return. THIS BOX MUST BE SIGNED AND DATED. For more information go to IRS website at: http://www.irs.gov/pub/irs-pdf/fw9.pdf?portlet=3
13	Please check the box that is appropriate for this Direct Deposit Request. Enter name of Financial Institution. Check appropriate box for type of account. Enter the Routing Transit number (9 digits) for the Financial Institution listed. Enter bank account number. Please read the next three statements and check the appropriate box. THIS BOX MUST BE SIGNED AND DATED. Please enter the contact information of person completing this form.

Submit Completed form to:
Texas Department of Criminal Justice - Accounts Payable
PO Box 4018
Huntsville, TX 77342-4018
 Email: tdcj.ap-invsvs@tdcj.state.tx.us
 Phone Number: 936/437-8761 or 936/437-6357 Fax Number: 936/437-6290