

UNIVERSITY OF HAWAII VENDOR MAINTENANCE FORM

(Please type or print legibly. Attach documentation displaying vendor name and address, e.g., invoice, etc.
With attachments, leave the name and address fields blank.)

1. CREATE New Vendor Code for:

BUSINESS: Non Reportable. (Attach invoice)

Reportable. (Attach invoice and W-9. If W-9 not available, submit later with either FMIS-12e or payment document.)

INDIVIDUAL: Regular Employee (Go to website: <https://www.pers.hawaii.edu/HRIN/r1219a.asp> and attach copy of print screen with Division, Branch & Section information or Complete Name & Address below.)

SCOPIS Employee (Complete Name & include College/Dept*)

RCUH Employee/Other State Employees (Complete Name & include College/Dept*)

Nonemployee Individual

Banner Student (Banner ID#: _____) (Complete Name & Address)

A. Name: _____

B. Address: _____

C. City: _____ D. State: _____ E. Zip Code: _____ F. Country: _____

2. CHANGE Existing Vendor Code: _____

(Attach new address information)

3. ADD 1099/1042 & WH Ind info to existing Vendor Code: _____

(Attach W-9, WH-1 and/or NE-Inv)

Prepared by: _____ (Fiscal Office Staff) (_____) # of fax pages (optional): _____
(FO Code)

Department: _____ Phone: _____

Deliver or fax completed FMIS-12e w/attachments (if applicable) to:

Disbursing Vendor Maintenance Group

1402 Lower Campus Rd, Rm 34

Honolulu, HI 96822

Fax Number: (808) 956-9145

Phone Numbers: (808) 956-6873, 6874 & 4782

Definitions:

W-9 – IRS Form W-9, Request for Taxpayer Information (Business)

WH-1 – Statement of Citizenship and Federal Tax Status (Individual)

NE-Inv – UH Form NE-INV, Non-Employee Invoice (Individual)

* - Check Destination, i.e., College or Department receiving the check