

# VENDOR PAYMENT INFORMATION FORM

## Federal Vendors

The Administrative Resource Center (ARC) requires the following information to be submitted prior to payment of any invoice. Please fax this completed form to ARC's Central Group at (304) 480-7077 or mail to ARC ASD - Central Group, Bureau of the Public Debt, PO Box 1328, Parkersburg, WV 26106-1328.

### Vendor Identification

Agency Name \_\_\_\_\_

Agency Location Code (ALC) \_\_\_\_\_

DUNS Number (if available) \_\_\_\_\_

Department Id \_\_\_\_\_ Bureau Code \_\_\_\_\_

Mailing Address \_\_\_\_\_

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### Signature of Authorized Vendor Representative

Agency Requesting Supplier Input:

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