To Whom It May Concern:

We are in receipt of a request to add you to our vendor file. To process the request, please complete and return to us the applicable W-8 form and UNCW Foreign Vendor Information Form (attached). To expedite payment, include your wire instructions on your invoice.

These forms ensure that we are in compliance with the United States Internal Revenue Service tax reporting and withholding regulations and that your vendor record is current and accurate in the UNC Wilmington purchasing system.

When completing the applicable W-8 form, please note the items below:

- If you are a nonresident alien individual and are claiming treaty benefits, please ensure you complete Part II on Form W-8BEN.
- If you are a nonresident alien entity and are claiming treaty benefits, please ensure you complete Part III on the Substitute Form W-8BEN-E Tax Treaty Benefits.
- If you are a nonresident alien entity that is performing a service outside the U.S, please complete the Substitute Form W8-BEN-E Foreign Sourced.
- If you are unable to claim treaty benefits, UNCW will withhold 30% in federal taxes from the payment, if applicable.
- All forms must be signed and dated.

If you have questions about completing the W-8 form, please contact Lisa Eakins, Tax Accountant at eakinsl@uncw.edu.

Please return the completed forms by secure fax at (910) 962-7006 or by email to vendortaxdoc@uncw.edu. To ensure the security of your data, please do not return to an individual’s email.

Sincerely,

John Robinson
Director, UNCW Purchasing Services
FOREIGN VENDOR INFORMATION FORM

Name of Firm: ____________________________

Send Order To – Please indicate preferred method to receive copies. If none is selected, UNCW will transmit to the Fax.

Sales support phone: ____________________________

Tech support phone: ____________________________

PO Fax #: ____________________________

Dedicated community email for POs (not personal email): ____________________________

Remit To: ____________________________

Contact: ____________________________

Phone #: ____________________________

Fax #: ____________________________

Address: ____________________________

Address: ____________________________

City, Province or State, Zip: ____________________________

City, Province or State, Zip: ____________________________

Country: ____________________________

Country: ____________________________

Are you or any officer of your company or any member of your immediate family employed by the State of North Carolina?

Yes____ No____ If yes, list name, relationship and agency where employed:

______________________________________________________________________________

Are you or any officer of your company or any member of your immediate family a member of the UNCW Board of Trustees, any UNCW foundation Board, or any UNCW related corporation, joint ventures, or associations?

Yes____ No____ If yes, list name, relationship and which Board.

______________________________________________________________________________
NATURE OF BUSINESS (describe and attach brochure if available)

☐ Manufacturer  ☐ Distributor  ☐ Jobber  ☐ Retailer  ☐ Services  ☐ Other (specify)

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All invoices must include a valid UNCW Purchase Order. All purchases are governed by State of North Carolina Law, NC General Terms and Conditions, and UNCW General Terms and Conditions.

**Payment Terms:** The State of North Carolina payment terms are “Net 30” date of invoice. When favorable to do so, however, UNCW may elect to take advantage of discount terms if your company offers them.

If your company offers a prompt payment discount (i.e.: 2/10, net 30), indicate below:

____________________________________________________________________________________

**Invoicing:** Invoices to UNCW may be submitted electronically to: accounts payable@uncw.edu.

**Wire Transfer Information:** UNCW requires payments to foreign vendors be processed as wire transfers initiated by UNCW. Please provide your wiring instructions on your invoice.

The undersigned certifies that the information contained herein is correct.

SIGNED ___________________________  Title: ___________________________

Name (printed) ___________________________  Date: ___________________________