

MD NRCS VENDOR CODE WORKSHEET

Instructions to Vendors:

1. Fill in only the following Blocks: 2, 3, 4, (5 if more space is necessary), 6, 7 and
2. Fill in the Electronic Funds Transfer (EFT) Banking Information to include: Bank Account Number, Account Type, Bank Routing Number and Bank Name (or attach a voided check in the space provided).

From:	1. Action		2. Vendor Code (SSN, Fed ID #)		3. Vendor Name (Field allows only 26 characters)	
	New <input type="checkbox"/>	Modify <input type="checkbox"/>				
	4. Address Line 1 (Required – Field allows only 30 characters)				7. Phone Number	
	5. Address Line 2 (Optional – Field allows only 30 characters)				8. Vendor Type	
	6. Address Line 3 (City, State, Zip)				12. Payment Hold	15. Prompt Pay Type
	14. 1099 Vendor	14a. 1099 Vendor (Name/Address)		*CCR DATABASE		
				SHOULD <input checked="" type="checkbox"/> SHOULD NOT <input type="checkbox"/> be registered in the SAM Database.		
* Vendors doing business with USDA under the terms of any contracts, basic agreements, basic ordering agreements, or blanket purchase agreements are required to register in the CCR Database.						

EFT INFORMATION (Mandatory) Either fill in the banking information or staple a cancelled check in the space provided

Bank Account Number	Account Type	Bank Routing Number
	Checking <input type="checkbox"/> Savings <input type="checkbox"/>	

Bank Name:

To:	This block is reserved for cancelled check or copy of check to display Banking information.
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Tracking notes for Submitting Office
Reference to our Contract Number:
SPECIAL NOTES FOR INDIVIDUAL INPUTTING VENDOR RECORD: