

City of Murphy
206 N. Murphy Rd
Murphy, TX 75094



PH: 972.468.4016
FAX: 972.468.4066
Email: finance@murphytx.org

Vendor Information Form

Vendor Name: _____
as shown on your income tax return

DBA Name: _____
if different from above

Tax ID #: _____ **Company Website:** _____

Physical Address: _____ **Vendor Phone:** _____
_____ **Vendor Fax:** _____

Remittance Address: _____ **Contact Name:** _____
_____ **Contact Phone:** _____
_____ **Contact Email:** _____

Type of Business/Products/Services Provided

Submit forms to [finance @murphytx.org](mailto:finance@murphytx.org) for Vendor consideration:

- 1) W-9
- 2) Conflict of Interest Questionnaire
- 3) Prohibitions and Verifications Declaration, if applicable (10 or more full-time employees, contract \$100,00 or more)
- 4) Vendor Information Form

Signature of Certifying Official: _____

Title: _____

Date: _____

ACCOUNTS PAYABLE USE ONLY

DATE: _____

INITIALS: _____