![MARICOPA COMMUNITY COLLEGES]

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Welcome - Step 1 of 6

To complete your registration, please fill in the information for each step of the registration process. Use the navigation buttons "Next" and "Previous" to move between steps.

Note: You will be required to upload an electronic copy of you W9 form during this process. If you do not have a letter-sized electronic copy (jpg, bmp, pdf, etc..), please obtain one before starting this process.

Once you have provided all the required information, proceed to the "Submit" step where you may submit your registration for consideration. You will receive an email confirmation shortly after submittal.

If you have any questions or feedback on the registration process, please call or contact:
Maricopa County Community College Purchasing Department
2411 West 14th Street
Tempe, AZ 85281-6942
URL: http://www.maricopa.edu/purchasing
Voice:(480) 731 - 8520
Fax: (480) 731 - 8190

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Step 1 of 6: Welcome: Read and click the Next button

* Required field

Previous   Next

Unique ID & Company Profile ②

Arizona Sales Tax ID	
* SSN /Tax Identification Number	
* Entity Name	
Additional Name	
http://URL	Open URL

* Please attach your W9
Add Attachment

Unique ID & Company:

Profile Step 2 of 6:
Does your company collect Arizona sales tax: If your company will collect sales tax provide your Arizona Sales Tax ID

SSN & Tax Identification

Number: This is your Social Security Number or your company's Tax Number.

Entity Name: This is your personal name or your company's name that will appear on your invoices.

Profile Questions ②

* What type of organization do you represent?   Sole Proprietor 🔍

Look Up List

Question ID	ORG TYPE
List Line Number = ▼	
List Item begins with ▼	

Look Up   Clear   Cancel   Basic Lookup

Search Results

View 100   First ① 1-9 of 9 ① Last

List Line Number	List Item
1	Corporation
2	Sole Proprietor
3	Foreign Sole Proprietor
4	Partnership
5	Estate
6	Government Agency
7	Foreign Corporation
8	Non-profit organization
9	LLC

Profile Questions:

What type of Organization do you represent: This is to let us know what type of business type you or your company represents. Click the magnify glass and choose the business type you represent. If you are an individual you will pick #2 Sole Proprietor.

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* Please select all that apply.

Not Applicable

List Line Number		List Item
1	☑	Not Applicable
2	☐	Small Business
3	☐	Minority Owned Business
4	☐	Woman Owned Business
5	☐	Veteran Owned Business
6	☐	Disabled Owned Business

Return

Please select all that apply:
Then click the Return button.
PLEASE complete this section to accurately capture your status.

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Please attach any MWBE certifications you have been issued. (Optional)

⤢ Add Attachment

Enter all applicable commodity codes in the Category 1 - 10 fields below. If the commodity code is not found, enter the description in the adjacent field.

Category 1	🔍	Category 6	🔍
Category 2	🔍	Category 7	🔍
Category 3	🔍	Category 8	🔍
Category 4	🔍	Category 9	🔍
Category 5	🔍	Category 10	🔍

Enter all applicable commodity codes in the category fields 1-10 below. If the Commodity code is not found enter the description in the adjacent field: The codes are what we pull from when mailing Advertisements for any IFB's or RFP's that are for any interested vendors who wish to submit a bid or a proposal.
Companies, if you click on the magnify glass and select the code/s that pertained to the service you provide.

Comments ⓘ

Comments: If you would like to make a comment, please type the message in the adjacent field.
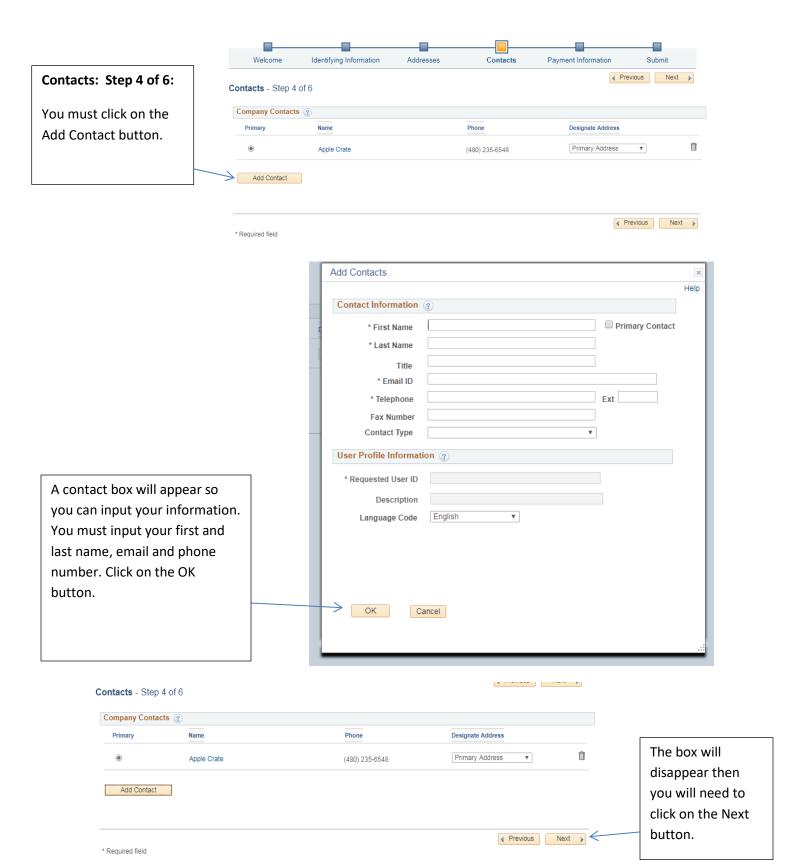
![MARICOPA COMMUNITY COLLEGES]

Addresses - Step 3 of 6

Enter Primary Address ⑦

* Country [USA] 🔍 United States
Address 1 [123 w 14 street]
Address 2 [ ]
Address 3 [ ]
City [Tempe]
County [ ]   Postal [85281]
State [AZ] 🔍 Arizona
Email ID [apple@gmail.com]

Other Addresses ⑦

Check boxes below to indicate addresses that are different from your Primary Address above:

☑ Remit To Address
Address for remitting payment
* Country [USA]   United States
Address 1 [ ]
Address 2 [ ]
Address 3 [ ]
City [ ]
County [ ]   Postal [ ]
State [ ] 🔍
Email ID [ ]

◀ Previous   Next ▶

Addresses Step 3 of 6: Enter Primary Address:

Address 1: This is the address where you live, or where you want the check to be mailed to.

Address 2 & 3: This is for any other address you want to include.
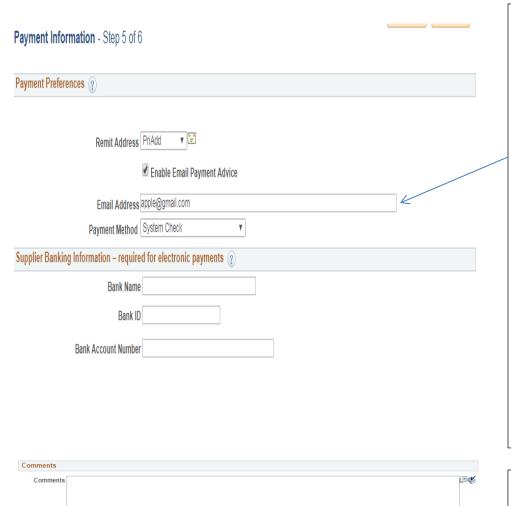**Email:** Is required

---

Other Addresses:
Remit to Address: This is where companies might want their checks and/or purchases orders mailed to instead of address listed above. Then click the Next button.

![Maricopa Community Colleges logo]

Contacts: Step 4 of 6:

You must click on the Add Contact button.

| Welcome | Identifying Information | Addresses | Contacts | Payment Information | Submit |

Contacts - Step 4 of 6

◄ Previous | Next ►

Company Contacts ?

Primary	Name	Phone	Designate Address	
⦿	Apple Crate	(480) 235-6548	Primary Address ▼	🗑

Add Contact

◄ Previous | Next ►

* Required field

A contact box will appear so you can input your information. You must input your first and last name, email and phone number. Click on the OK button.

Add Contacts   ✕

Help

Contact Information ?

* First Name	☐ Primary Contact
* Last Name	
Title	
* Email ID	
* Telephone	Ext
Fax Number	
Contact Type	▼

User Profile Information ?

* Requested User ID	
Description	
Language Code	English ▼

OK   Cancel

Contacts - Step 4 of 6

Company Contacts ?

Primary	Name	Phone	Designate Address	
⦿	Apple Crate	(480) 235-6548	Primary Address ▼	🗑

Add Contact

◄ Previous | Next ►

* Required field

The box will disappear then you will need to click on the Next button.

![MARICOPA COMMUNITY COLLEGES]

Payment Information - Step 5 of 6

Payment Preferences (?)

Remit Address [PriAdd ▼] 🔲

☑ Enable Email Payment Advice

Email Address [apple@gmail.com]

Payment Method [System Check ▼]

Supplier Banking Information – required for electronic payments (?)

Bank Name [   ]

Bank ID [   ]

Bank Account Number [   ]

Comments

Comments [   ]

[◄ Previous] [Next ◄]

*Required Field

Payment Information 5 of 6:

You must input your email address and the payment method you want. When you click on the drop down box and you will select the method System Check or Automated Clearing House.

Supplier Bank Information: This is required only if you want electronic payment. You would put your Bank Name and the Bank ID number which is your routing number then input your Bank Account Number and an email to notify you when the payment is being submitted to your account.

Comments: In the adjacent field you can include any question or statements you want to add. Then click on the Next button.

Submit - Step 6 of 6

Click the "Review" button to review the registration information.

Click the "Submit" button to submit your registration after reviewing and accepting following Terms of Agreement .

Submit Step 6 of 6:

Terms of Conditions:

Name of the person creating the registration: This is the name of the person who is inputting the information in the system. This is in case there is a question about the information that was submitted. This email is where after two approvals the supplier number will be sent. **This process may take up to three business days to complete.**

Terms and Conditions ⓘ

*Name of person creating registration:

Email communication regarding this registration will be sent to:

apple@gmail.com

Make sure you read terms of agreement fully before submitting your registration.

☑ Click to accept the Terms of Agreement below.

Terms of Agreement

Review   Submit

Make sure you read terms of Agreement fully before submitting your registration:

Click on the button to accept the Terms of Agreement.
If you want to review your information click review, otherwise click the Submit button and you are Finished.