

This information is required from each service provider/contractor/vendor doing business with the State of California. ***The completed form must be on file with California State University Channel Islands prior to payment.*** Questions? Call (805) 437-8449.

PLEASE USE BLACK INK, PRINT OR TYPE

Send ORDERS to:

Company Name _____

STREET/P.O. BOX _____

CITY, STATE, ZIP CODE _____

AREA CODE AND PHONE _____

SITE FAX (for FAX orders) _____

SITE E-MAIL _____

CONTACT NAME _____

CONTACT TITLE _____

CONTACT AREA CODE AND PHONE # (if different from site phone) _____

Send PAYMENTS to:

STREET/P.O. BOX _____

CITY, STATE, ZIP CODE _____

AREA CODE AND PHONE _____

FAX # _____

EMAIL _____

CONTACT NAME _____

CONTACT TITLE _____

CONTACT AREA CODE AND PHONE # (if different from site phone) _____

CSUCI standard terms are Net 30 unless payment discount offered.

Payment Terms: _____

Ship Via: _____

FOB: _____ Destination _____ Ship Point _____

Freight Terms: _____ Prepaid and Add _____ Prepaid and Allowed _____

Contractor's license classification: _____

(Example: MasGnry, C-29)

(If class is Limited Specialty, C-61, specify specialty)

Briefly describe primary commodity, equipment or service offered:
(List one only. Enclose product line card and catalogue CD if available.)

WEB Site Address: _____

Send BIDS to:

STREET/P.O. BOX _____

CITY, STATE, ZIP CODE _____

SITE AREA CODE AND PHONE # _____

FAX # (for bid) _____

EMAIL _____

CONTACT NAME _____

CONTACT TITLE _____

CONTACT AREA CODE AND PHONE _____

Check all that apply:

Supplier/Contractor is certified in the following categories:

____ Disabled Veteran Owned Business*

Must be certified through OSBCR; 51 % ownership and
10% service-related disability.

____ Small Business*

Must be certified by the State of California through OSBCR

* Attach Office of Small Business Certification and Resources
(OSBCR) certification letter (formerly OSMB).

Supplier provides recycled products:

Compost and Co-Compost

Fine Printing and Writing Paper

Glass Products

Lubricating Oils

Paint

Paper Products

Plastics

Steel

Solvents

Tire-Derived Products

Tires

Emergency Resource Information: By providing the following information, supplier/contractor may be called upon to provide resources in the event of a campus emergency or when the campus is designated a relief shelter for area residents by the County Emergency Services Department. This data is confidential and will only be used in time of extreme emergencies.

Contact (after business hours): _____ Relation to business: _____

(Example: owner partner, manager)

Residence Phone: _____

Cellular Phone: _____

Deliver to Emergency sites? Yes No

Accept return of unused supplies? Yes No

Emergency Resource Information will be updated annually.

Rev.3/17

Supplier/Contractor's endorsement on VDR Form 204 certifies that all information provided herein is correct. Supplier/Contractor is aware of Sect. 12650 et seq. of the Government Code which imposes treble damages for false claims against the State, and Sect. 10115,10 of the Public Contract Code making it a crime for intentional untrue statements in this certification.