

**Primary Health Network and PHN Charitable Foundation  
Vendor Application Worksheet**

<b>Contact Information</b>	
Company Name:	
Street Address1:	
Street Address2:	
City, State, Zip:	
Phone:	
Fax:	
Company Website Address:	
Sales Contact Name:	
Sales Contact Phone:	
Sales Contact Email:	
Billing Address (if different from above):	
Street Address1:	
Street Address2:	
City, State, Zip:	
Billing Contact Name:	
Billing Contact Phone:	
Billing Contact Email:	
Special Billing Instructions:	

<b>Company Information</b>	
Organization Type: (Corporation, LLC, Other - please specify and attach W-9)	
Taxpayer ID No.:	
D-U-N-S No. (if applicable):	
State of incorporation (if applicable):	
For profit/not-for-profit:	
Names of parent company/companies:	

**Primary Health Network and PHN Charitable Foundation  
Vendor Application Worksheet (continued)**

Ownership (check all that apply):	
Small business	<input type="checkbox"/>
Minority-owned business	<input type="checkbox"/>
Veteran-owned business	<input type="checkbox"/>
Women-owned business	<input type="checkbox"/>
Veteran-disabled-owned business	<input type="checkbox"/>
Other	<input type="checkbox"/>

If Other, Please specify:

<b>Products/Services for which the Company desires to provide:</b>

<b>Other Information for Consideration</b>

<b>Company Verification</b>
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Is anyone associated with the Company - either through ownership or other business/financial relationship\* - an employee or Board Member of PHN or its subsidiaries? Yes or No. If Yes, list name and affiliation.

Signature of Company Representative

For internal use only:		
Review Procedure	Date	Result
SAM Verification		
OIG List of Excluded Individuals Verification		
GSA Excluded Parties List Verification		

Approval Signature:

\* Note that a person has a business/financial interest if the person has, directly or indirectly, through business, investment or family:

- a. An ownership or investment interest in the Company;
- b. A compensation arrangement with the Company or with any entity or individual with which the Company has a transaction or arrangement; or
- c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Company is negotiating a transaction or arrangement.

Note that compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.