



“WHAT WE DO HERE SHAPES THE WORLD”

Vendor Update Information Form

Enter Your Vendor Number:	
Vendor Name:	
ORDER INFORMATION	This information relates only to the contact and address information for the individual who should receive Purchase Orders from Los Fresnos CISD either via e-mail or fax.
Order Contact Person Name:	
Order Contact Person Title:	
Order Phone Number:	
Order Fax Number:	
Order Address Line 1:	
Order Address Line 2:	
Order City:	
Order State:	
Order Zip Code (5 digits)	
Order Zip Code Extension (4 digits)	
Order E-mail Address:	
ACCOUNTS PAYABLE INFORMATION	This information relates only to the contact and address information for the individual who should be contacted by Los Fresnos CISD either via e-mail or fax for assistance or inquiries regarding accounts payable.
AP Contact Person Name:	
AP Contact Person Title:	
AP Phone Number:	
AP Fax Number:	
AP Address Line 1:	
AP Address Line 2:	
AP City:	
AP State:	
AP Zip Code (5 digits)	
AP Zip Code (4 digits)	
AP E-mail Address:	