



City of Bellmead

We are happy to welcome you as a new vendor to the City of Bellmead. The goal of this letter is to assist you in understanding our policies and procedures to ensure timely payment of your invoices.

Vendor Set-up Requirements:

The following forms are required:

1. A completed *Vendor Information Sheet* Form
2. A completed W9 Form: Federal Income Tax Law requires us to have your Taxpayer Identification Number (TIN) on file.
3. House Bill 89 Verification Form
4. Conflict of Interest Questionnaire
Required if applicable:
5. Automated Clearinghouse (ACH) Payment Authorization Agreement

Purchase Orders

Purchase orders are required for all purchases and services of \$1000 or more. No merchandise is to be shipped or picked up by a City of Bellmead employee, as well as services commencing, without a valid purchase order number on orders of \$1000 or more. If purchases are less than \$1000 a name of the purchaser is required in the purchase order field. If there is a price increase or revisions to original orders they must be submitted in writing and authorized by the purchaser.

Payment Procedures

As a municipality, our terms of payment are net 30 days and we will accept vendor discounts for early payment terms. The City of Bellmead is exempt from all state and city sales taxes. A *Texas Sales and Use Tax Exemption Certification* will be provided upon request. Payments are sent via check or can be expedited via ACH. Please complete the enclosed *Automated Clearinghouse (ACH) Payment Authorization Agreement for Vendor Payments* form.

Invoices/Contact

All invoices for payment should be sent to City of Bellmead Accounts Payable department via the following:

MAIL	3015 Bellmead Dr. Bellmead, TX 76705
FAX	(254)799-5969, Attention Accounts Payable
EMAIL	finance@bellmeadtx.gov

All invoices submitted for payment must have the purchase order number referenced. Invoices will not be paid for work that is not complete or items not received.

We look forward to a long term partnership.

**CITY OF BELLMEAD
VENDOR INFORMATION SHEET**

Complete this form in its entirety

New Revision City of Bellmead Employee Point of Contact _____

Vendor Name _____

Payable to (if different from vendor name) _____

Remittance Address Line 1 _____

Remittance Address Line 2 _____

City, State, Zip code _____

Phone number (_____) _____ Fax Number (_____) _____

Contact _____ Email Address _____

***If requested through the Public Information Act, vendor names, point of contact, address and email address(s) of vendors who seek or have contracts with the City may be disclosed to the public.**

For State and Federal Reporting Purposes:

Is your business 51% owned, operated, and controlled by one or more persons who are:

Women Black Hispanic Asian Pacific Islander Native American NA

Provide your taxpayer identification number.

For individuals, this is your social security number (SSN). For other entities, it is the employer identification number (EIN)

Individual: Social Security Number:

OR

Employer Identification Number:

Does any City of Bellmead employee have a financial interest in this business entity? Yes No

If so, what is the name of the city employee? _____

Business is unable to be conducted with entity if it violates the City of Bellmead's City Charter, Article XII, Section 120.02.

No City Council member, City officer or City employee shall have a pecuniary interest in any contract or matter that is paid from the City treasury, pursuant to **City of Bellmead's City Charter, Article XII, Section 120.02.**

I have the authorization to sign on behalf of this Vendor.

Signature: _____ Date: _____

Printed Name: _____

SEND ORIGINAL INVOICES TO:

**CITY BELLMEAD, ACCOUNTS PAYABLE, 3015 BELLMEAD DR, BELLMEAD, TX 76705, or
by fax to 254-799-5969, or email to finance@bellmeadtx.gov**

Payment: Please provide purchase order number on all invoices \$1000.00 or more or name of Purchaser on the invoice if less than \$1,000.00. The CITY OF BELLMEAD pays according to the terms of the Texas "Prompt Payment Law", Texas Government Code, Chapter 2251.

Taxes: The CITY OF BELLMEAD is exempt from all Federal Excise Tax and State of Texas Limited Sales Excise and Use Tax. Exemption certificates will be signed and executed by the Chief Financial officer upon request when supported by an authorized purchase order number.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	--------------------------	------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

House Bill 89 Verification Form

Prohibition on Contracts with Companies Boycotting Israel

The 85th Texas Legislature approved new legislation, effective Sept. 1, 2017, which amends Texas Government Code Section 1. Subtitle F, Title 10, Government Code by adding Chapter 2270 which states that a governmental entity may not enter into a contract with a company for goods or services unless the contract contains a written verification from the company that it:

- 1) does not boycott Israel; and
- 2) will not boycott Israel during the term of the contract

Pursuant to Section 2270.001, Texas Government Code:

1. "Boycott Israel" means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and
2. "Company" means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.

I, (authorized official) _____, do hereby depose and verify the truthfulness and accuracy of the contents of the statements submitted on this certification under the provisions of Subtitle F, Title 10, Government Code Chapter 2270 and that the company named below:

- 1) does not boycott Israel currently; and
- 2) will not boycott Israel during the term of the contract; and
- 3) is not currently listed on the State of Texas Comptroller's Companies that Boycott Israel List located at <https://comptroller.texas.gov/purchasing/publications/divestment.php>

Company Name

Signature of Authorized Official

Title of Authorized Official

Date

FAQ's

Here are some frequently asked questions and answers:

Q. What do I need to do to be set up as a vendor with ACH vendor payment?

- A. Just follow these simple steps: Complete the ACH Vendor Payment Authorization Agreement
Attach a voided check with clearly shows the
- Bank account holder's name
 - Account number
 - Financial institution's name
 - Routing number
 - Send the signed agreement & voided check to finance@bellmeadtx.gov or by mail to :

City of Bellmead
Accounts-Payable
3015 Bellmead Dr.
Bellmead, Texas 76705

Q. What is ACH Vendor Payment?

- A. ACH Vendor Payments is a system that deposits payment for goods and/or services that you have sold to City of Bellmead Texas directly into your account at any financial institution that is a member of the Automated Clearing House Network

Q. Who is eligible for ACH Vendor Payment?

- A. All vendors that provide goods and/or services to City of Bellmead Texas who are now being paid by check through

the City's accounts payable department. Hotels/Motels are excluded.

Q. What steps should I take to assure that my payment is deposited to my account?

- A. Verify with your financial institution that the routing number used for electronic payments into your account is the same as indicated on your check. If it is not the same, please obtain and provide the correct routing number from your financial institution.

Q. When will my payment be deposited in my account?

- A. Your payment will be deposited into your account based on the settlement date referenced on your direct deposit advice e-mail.

Q. What do I do if for some reason my payment is not deposited into my account?

- A. Simply contact the Accounts Payable department, and we can investigate starting with the account information provided and the date the deposit was processed per the remit email.

Q. After I apply for ACH Vendor Payment, how soon can I expect to participate?

- A. Once you authorize ACH Vendor payments into your bank account, you will receive one more check from the

City. Your account will be pre-noted—a zero dollar ACH entry to test the banking information you supplied. You will receive an email indicating that a prenote will take place. After a pre-note, the City will no longer send your checks.

Q. What happens if I change financial institutions and/or accounts?

- A. In the event that you change financial institutions, or account number within the same financial institution, simply provide a new ACH Payment Authorization Agreement form and a voided check and mark the "Revision" box at the top. Until your account change has been completed, you may receive your payment by mail. It is the vendor's responsibility to advise the City of any changes and to do so in a timely manner. The City requires ten (10) working days to process the changes.

Q. What happens if the company/business changes ownership?

- A. In the event there is a change in ownership, the City needs to be notified right away. A new complete set of vendor forms will need to be completed and submitted to accounts payable in order to avoid any delay in receiving payments for goods/services from the City.

If you have any questions about ACH Vendor Payment, contact accounts payable at finance@bellmeadtx.gov or 254-799-2436

**CITY OF BELLMEAD
AUTOMATED CLEARINGHOUSE (ACH) PAYMENT AUTHORIZATION
AGREEMENT FOR VENDOR PAYMENTS**

NEW **REVISION**

I, an authorized signatory on the below account, hereby authorize the City of Bellmead, Texas (the "City") to originate Automated Clearinghouse (ACH) credits for invoice payments, and further authorize ACH debits but only in the event that the City issued an incorrect or duplicate ACH credit to this account.

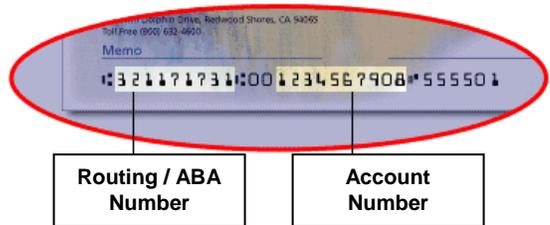
Vendor Name on Account

Financial Institution Name

Bank Phone #

Account Number

Routing / ABA No.



Account Type: **Checking** **Savings**
Commercial **Personal**

Please attach a voided check or letter from your bank providing confirmation of your account for verification.

This agreement is to remain in effect until the City has received written notification of its termination in such time and manner to reasonably act on it.

Once you authorize direct deposits into your bank account, you will receive one more check from the City. Your account will be pre-noted -- a zero dollar ACH entry to test the banking information you supplied. You will receive an email indicating that a prenote will take place.

After a pre-note the City will no longer send you checks. You will receive ACH deposits directly to your bank account along with an email describing what is being paid.

Vendor Address (City/State/Zip):		Phone #:
Email address to receive payment notices:		
Person completing form:	Title:	
Date:	Authorized Signature:	
President of Company (required)	Email Address:	

This area is for City Use	
Finance Verification: ___ Pass ___ Fail Date _____	Contact Name for Verification _____ Contact Number for Verification _____
Finance Employee Signature: _____	

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

2 Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7

Signature of vendor doing business with the governmental entity

Date

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

(i) a contract between the local governmental entity and vendor has been executed;
or

(ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

(i) a contract between the local governmental entity and vendor has been executed; or

(ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

(1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);

(2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or

(3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or

(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);

(B) that the vendor has given one or more gifts described by Subsection (a); or

(C) of a family relationship with a local government officer.