

VENDOR INFORMATION

Company Name and DBA (if applicable)		
Hawaii Address		
Remit to Address		Web Site Address
Primary Contact		
Name:		
Telephone Number:		
Fax Number:		
Email Address:		
Accounting Contact		
Name:		
Telephone Number:		
Fax Number:		
Email Address:		
Hawaii General Excise Tax ID	Tax Charged	Early Payment Terms
	<input type="checkbox"/> 4.712% <input type="checkbox"/> 4.166% <input type="checkbox"/> 0%	<input type="checkbox"/> 2%/10 Days
	<input type="checkbox"/> Other _____	<input type="checkbox"/> None – Net 45
Description of your business and products/services you provide:		
Interested in receiving Requests for Proposals (RFPs)		
<input type="checkbox"/> Yes		
<input type="checkbox"/> No		
Categories of interest:		