

## Department of Administrative Services - State Accounting Enterprise

Section	Procedure Number	Page Number	Effective Date
PRE-AUDIT	270.450	1 of 5	July 1, 2003 Revised 10/5/10
<b>Subject</b> PROCESSING VENDOR CODES			

The Internal Revenue Service (IRS) states: "Taxpayer Identification Numbers (TIN's) are used to associate and verify amounts reported to the IRS with corresponding amounts on tax returns. Therefore, it is important that correct TIN's are furnished for vendors of the State. The TIN for an individual is the social security number. For other recipients, it is the employer identification number (EIN), except for sole proprietors.

### A. General Information

1. Be wary of an EIN that is actually the sales tax permit number. In Iowa, sales tax permit numbers begin with the number 1. The 2nd and 3rd position is the county number where the vendor is doing business. The 4th position is then number 0.
2. When using different locations for a vendor, enter the vendor under separate locations if the various locations are routinely used.
3. It is important to obtain the correct TIN of vendors. Incorrect vendors create potential penalties for the State of Iowa. The IRS penalty for incorrect vendor numbers is \$50 per occurrence. It is the department's responsibility to obtain and enter the correct TIN number. Any fines issued to the State of Iowa for incorrect TIN will be passed on to the entering department. If the department can prove that the vendor supplied the incorrect information, they can pass the fine on to them. The best way to prove this is with a signed W-9 from the vendor. Page 5 of this procedure is a sample of a substitute W-9 that can be ordered through DAS-GSE-Centralized Printing.

### B. On-lining Vendor Names

1. Names MUST be entered on the vendor file in accordance with name controls established by the IRS. These are summarized below:
  - a. **Social Security Number**
    - (1) **Individuals** - The name control for individuals is the first four letters of the last name. Name controls on last names require the use of hyphens.  
  
EXAMPLES: John A El-Oak last name should be El-Oak  
Ann O'Spruce last name should be OSpruce
  - b. **Employer Identification Number (EIN)**
    - (1) **Corporations** - Name controls for corporations require that at least the first four characters of a corporate must ALWAYS be spelled out, except for when the word "the" is used. When the word "the" is used, and "the" is followed by more than one word, "the" must be excluded when used as a prefix to the name.  
  
EXAMPLES: The Vacuum - remains - The Vacuum  
The 813 Club Inc - becomes - 813 Club Inc The



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1. **NAMES WITH JR, III, MD, DO, DR, ETC.**

- a. Dr. should be entered on the first name line as: *DR Edward*
- b. Jr, III, etc., should be entered on the last name line as *Ripken Jr*
- c. MD, DO, DPM, etc., should be entered on the last name line, middle initial, then the designation: *Brooke MD A*

2. **BOX AND PO BOX, RURAL ROUTE (RR), HIGHWAY CONTRACT (HC), AND GENERAL DELIVERY**

- a. Box must appear as PO Box, unless it appears with RR, or HC, or St (street). If it appears with RR, HC, or St, the PO is not placed in front of "Box".

EXAMPLE: PO Box 111

EXAMPLE: RR 5 Box 222

EXAMPLE: 1582 10th St Box 10

- b. Addresses containing both a street address and a PO Box number must be entered on separate Address Lines. The USPS will deliver to the address typed on Address Line 2 (if there is something there) which must always be the PO Box number.

EXAMPLE:	<u>INCORRECT</u>	<u>CORRECT</u>
	John Jones Box 123 4 Park Ave Ames, IA 50010	John Jones <b>4 Park Ave</b> <b>PO Box 123</b> Ames, IA 50010

- c. The vendor's full name must be typed in full if the address includes a Rural Route (RR), Highway Contract Route (HC), Box Number (PO Box) or General Delivery (no abbreviation).

EXAMPLE: G Forman should be George Forman, III

- d. Use <https://tools.usps.com/go/ZipLookupAction!input.action> to verify the correct address.

3. **APARTMENT, BUILDING, FLOOR, ETC.**

- a. Use the secondary address unit designators, if known. These should be typed on Address Line 1. The most common of these are as follows:

Apartment / Apt	Floor / Fl	Department / Dept
Building / Bldg	Suite / Ste	Room / Rm

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- b. Secondary address unit designators should be typed on Address Line 1. However, if there is not enough room on line 1 for the entire address, then the secondary address unit designator must be entered on the first line, and the street address on the Second Line.

*Ste 3*

EXAMPLE: 444 NE Oak Ave Ste or 444 NE Information Ave

- c. The pound sign (#) or number abbreviation (no) should not be used as a secondary unit designator if the correct designation, such as apt or ste, is known. If “#” or “no” is shown as the secondary address unit designator on the document, there must be one space between the “#” or “no” and the secondary number.

EXAMPLES: 425 Boone St # 72 or 425 Boone St no 72

#### 4. **PUNCTUATION**

Punctuation should be used in street and city names ONLY when necessary for clarity.

EXAMPLE: 444-446 SE 3rd St

#### 5. **SUFFIXES**

Suffixes must be abbreviated. Listed below are the most common suffixes used.

Street / St	Avenue / Ave
Place / Pl	Circle / Cir
Lane / Ln	Road / Rd
Drive / Dr	Parkway / Pkwy
Trail / Trl	Terrace / Terr

#### 6. **DIRECTIONALS**

- a. A directional is a term the USPS uses to refer to the part of the address that gives directional information for delivery. If one of the eight standard directionals is used, it must be abbreviated to the appropriate one or two character abbreviations that are listed below.

N - North	E - East	NE - Northeast	SE - Southeast
S - South	W - West	NW - Northwest	SW - Southwest

- b. If a directional word is found as the first word in the street name with no other directional to the left of it, it must be abbreviated.

EXAMPLE: North Bay Street- becomes N Bay St

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## 7. MISCELLANEOUS

- a. If there is no address, type in "C/O Postmaster" on Address Line 1. Use C/O, not the %.
- b. The "C/O" and "ATTN:" must always be in the Address Line 1.
- c. Numeric street names (7th St, Seventh St) must be entered exactly as they appear in the official address.
- d. Provide the Zip +4 code whenever obtainable. DO NOT enter 4 zeros as the last four digits.
- e. If DBA is utilized, only one Address Line is available (Address Line 2).
- f. There must be one space between all words, numbers, directionals, etc.

## D. Converting

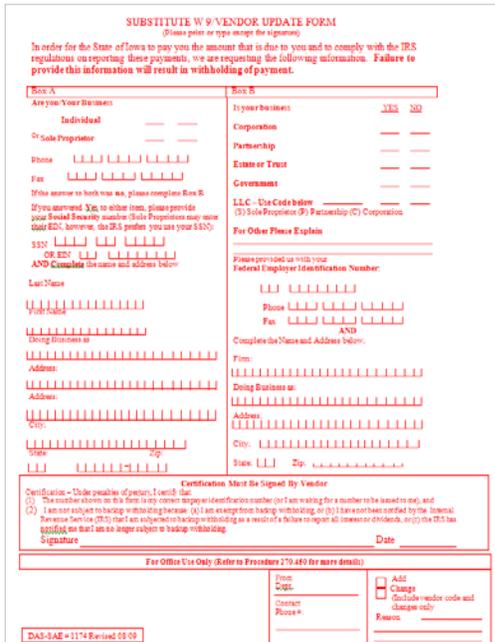
Changing the legal name of a state employee, changing an incorrect vendor/customer number (for either an employee or an external vendor), and changing an employee to a non-employee or vice versa requires completion of the Vendor Conversion Form and must be sent to DAS-SAE. *(See below)* **Note: Vendors are not deleted from I/3. They are either inactivated or converted.**

## E. Entering Vendor Codes into I/3

This link provides the most current instructions:

<http://sp.iowa.gov/sites/00070/SitePages/Home.aspx>

### Substitute W-9 Vendor Form



**SUBSTITUTE W-9 VENDOR UPDATE FORM**  
(Please print or type except for signature)

In order for the State of Iowa to pay you the amount that is due to you and to comply with the IRS regulations on reporting these payments, we are requesting the following information. Failure to provide this information will result in withholding of payment.

**Box A - Your Business**  
 Are you an **Individual** \_\_\_\_\_  
 Or **Sole Proprietor** \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_  
 If the answer to both was no, please complete Box B.  
 If you answered **Yes** to either item, please provide your Social Security number. (Sole Proprietors may use their EIN, however, the IRS prefers you use your SSN).  
 SSN: \_\_\_\_\_  
 OR EIN: \_\_\_\_\_  
 AND Complete the name and address below:  
 Last Name \_\_\_\_\_  
 First Name \_\_\_\_\_  
 Complete the Name and Address below:  
 Address: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

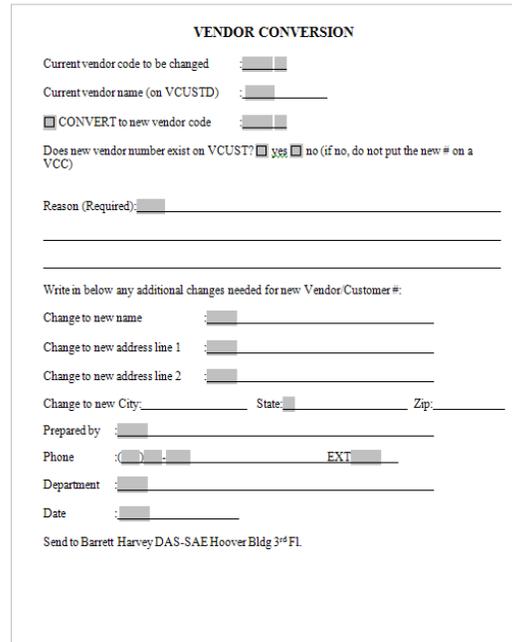
**Box B - Your Business**  
 Is your business \_\_\_\_\_  
 Corporation \_\_\_\_\_  
 Partnership \_\_\_\_\_  
 Estate or Trust \_\_\_\_\_  
 Government \_\_\_\_\_  
 LLC - Use Code below \_\_\_\_\_  
 (S) Sole Proprietor (P) Partnership (C) Corporation  
 For Other Please Explain \_\_\_\_\_  
 Please provide us with your Federal Employer Identification Number: \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_  
 AND \_\_\_\_\_  
 Complete the Name and Address below:  
 Firm: \_\_\_\_\_  
 Doing Business at: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Certification - Must be Signed by Vendor**  
 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 income or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only (Refer to Procedure 270.460 for more details)  
 Done \_\_\_\_\_  
 Date \_\_\_\_\_  
 Contract \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 Add  
 Change  
 Include vendor code and change only  
 Renewal

DAS-SAE = 11/14 Revised 03/09

### Vendor Conversion Form



**VENDOR CONVERSION**

Current vendor code to be changed: \_\_\_\_\_

Current vendor name (on VCUSTD): \_\_\_\_\_

CONVERT to new vendor code: \_\_\_\_\_

Does new vendor number exist on VCUST?  Yes  No (if no, do not put the new # on a VCC)

Reason (Required): \_\_\_\_\_

Write in below any additional changes needed for new Vendor Customer #:

Change to new name: \_\_\_\_\_

Change to new address line 1: \_\_\_\_\_

Change to new address line 2: \_\_\_\_\_

Change to new City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Prepared by: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ EXT \_\_\_\_\_

Department: \_\_\_\_\_

Date: \_\_\_\_\_

Send to Barrett Harvey DAS-SAE Hoover Bldg 3rd Fl.