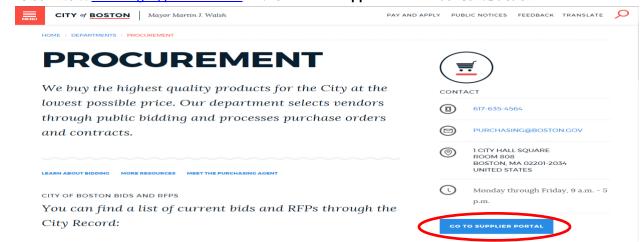
# 更新現有供應商帳戶的信息

歡迎使用波士頓市供應商門戶網站。如要更新信息,請按照以下詳細步驟來更新現有的供應商帳 戶信息,包括註冊直接存款。

1. 導航至網站 boston.gov/procurement,單擊 "Go to Supplier Portal - 轉到供應商門戶"



2. 登錄後·單擊 "Main Menu - 主菜單"·然後單擊"Add/Update Vendor Profiles - 添加/更新供應商資料"。



3. 如要更新供應商資料,請單擊 "Update Existing Vendor Information - 更新現有供應商資料"



4. 在帳戶的適當項目中進行任何必要的更改。單擊"下一步 - Next"。



5. 如想更快地付款·請填寫直接存款(A.C.H. - 自動化票據交換所)信息。當完成所有信息後 · 點擊 n"Click to Sign - 點擊簽名",然後點擊 "Next - 下一步"。

(如果您想用美國郵件收到紙質支票,您可以勾選屏幕左下方的"Direct Deposit Opt Out - 直接 存款選擇退出"框,選擇退出直接存款,然後點擊"Next - 下一步"。)

All the same of the same		to the City of Free	on Supplier Por	ta	
City of We Boston	Icome Paul Mac	k to the City of Bosi		Section 1	
vorites Main Menu >	Add/Update Vendor F	Profiles			
Request to bec	ome a City of	Boston Vendor	Authored by		
itep 3 of 7: ACH En	rollment for Dire	ct Deposit	_		
NRECT DEPOSIT ENRO	DLLMENT	PAYMENT	TYPE DIRECT DEPO	TIPO	
Previous	Next		EPOSIT NEW ENROL		
		Direct Depos	t Form		
		CITY OF BO TREASURY DEI ACH VENDORMISCELL ENROLLMEN	PARTMENT ANEOUS PAYMENT		
		presenting this form for co	mpletion.		
The following informa required under the pro transmit payment data or prevent the receipt	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through	nply with the Privacy Act o . 3322 and CFR 210. This ir s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro	ed by the Treasury vide the requested	Department to
The following informa required under the pro transmit payment data or prevent the receipt	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through	nply with the Privacy Act o . 3322 and CFR 210. This ir s to vendor's financial inst	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro	ed by the Treasury vide the requested	Department to
Privacy Act Statement The following informa required under the pro transmit payment data or prevent the receipt inancial Institution Inf	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through	nply with the Privacy Act o . 3322 and CFR 210. This ir s to vendor's financial inst	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro	ed by the Treasury vide the requested	Department to information may delay
Privacy Act Statement The following informa required under the pro transmit payment data or prevent the receipt inancial Institution Inf	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through	nply with the Privacy Act o . 3322 and CFR 210. This ir s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro ouse Payment Syster	ed by the Treasury vide the requested m.	Department to information may delay
Privacy Act Statement The following informa required under the pro transmit payment date or prevent the receipt inancial Institution Inf *Bank Name  *Bank Account Type	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through formation	nply with the Privacy Act o . 3322 and CFR 210. This in s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A formation will be use itution. Failure to pro ouse Payment Syster *City	od by the Treasury vide the requested m.	Department to information may delay
Privacy Act Statement The following informa required under the pro transmit payment date or prevent the receipt inancial Institution Inf *Bank Name  *Bank Account Type	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through formation	nply with the Privacy Act o . 3322 and CFR 210. This in s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A formation will be use itution. Failure to pro ouse Payment Syster *City	od by the Treasury vide the requested m.	Department to information may delay
Privacy Act Statement The following informa required under the pro transmit payment data or prevent the receipt inancial Institution Inf *Bank Name  *Bank Account Type  *Direct Deposit Paymen	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through formation	nply with the Privacy Act o . 3322 and CFR 210. This in s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A formation will be use itution. Failure to pro ouse Payment Syster *City	od by the Treasury vide the requested m.	Department to information may delay
Trivacy Act Statement The following informa required under the pro transmit payment data or prevent the receipt inancial Institution Inf *Bank Name  *Bank Account Type  *Direct Deposit Paymen *Email ID	tion is provide to con ovisions of 31 U. S. C a, by electronic mean of payments through formation	nply with the Privacy Act o . 3322 and CFR 210. This in s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A formation will be use itution. Failure to pro ouse Payment Syster *City	od by the Treasury vide the requested m.	Department to information may delay
Privacy Act Statement The following informa required under the pro transmit payment date or prevent the receipt inancial Institution Inf "Bank Name  "Bank Account Type  "Bank Account Type  "Email ID  Signature I hereby authorize the The City of Boston Tre bank liable for any err	tion is provide to concisions of 31 U. S. Ca, by electronic mean of payments through formation  "Routing Number  It Notification  City of Boston's Tree easurer is authorized oneous deposits or a	nply with the Privacy Act o . 3322 and CFR 210. This in s to vendor's financial inst the Automated Clearing H	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro- ouse Payment Syster  *City  Phone  ayments due me at th idjust any over depos ity of Boston Treasur	ed by the Treasury vide the requested m.  *State  Phone Extension  for financial institute it made to my accounts.	Department to information may delay e *Postal Code on
Privacy Act Statement The following informa required under the pro transmit payment date or prevent the receipt inancial Institution Inf "Bank Name  "Bank Account Type  "Bank Account Type  "Email ID  Signature I hereby authorize the The City of Boston Tre bank liable for any err	tion is provide to concisions of 31 U. S. Ca, by electronic mean of payments through formation  "Routing Number  It Notification  City of Boston's Tree easurer is authorized oneous deposits or a	"Address  "Bank Account Number  assurer's Office to ACH all p to debit my account or to a	f 1974 (P.L. 93-579). A Iformation will be use itution. Failure to pro- ouse Payment Syster  *City  Phone  ayments due me at th idjust any over depos ity of Boston Treasur	ed by the Treasury vide the requested m.  *State  Phone Extension  for financial institute it made to my accounts.	Postal Code  *Postal Code  information may delay  *Postal Code  information may delay

- 6. 審核 W-9 認證信息。如要繼續,請單擊 "Click Here to Acknowledge 點擊這裡確認" 按鈕
  - ,然後單擊 "Next 下一步"。 如果項目 2 不適用,請按指示在方框中打勾。



Step 4 of 7: W-9 Certification

#### W-9 Certification

Under penalties of perjury, I certify that:

- 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. person (including a U.S. resident alien).

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.



7. 勾選此復選框以確認您或您所代表的組織均未被禁止與波士頓市展開業務。單擊 "下一步-

### Next" °



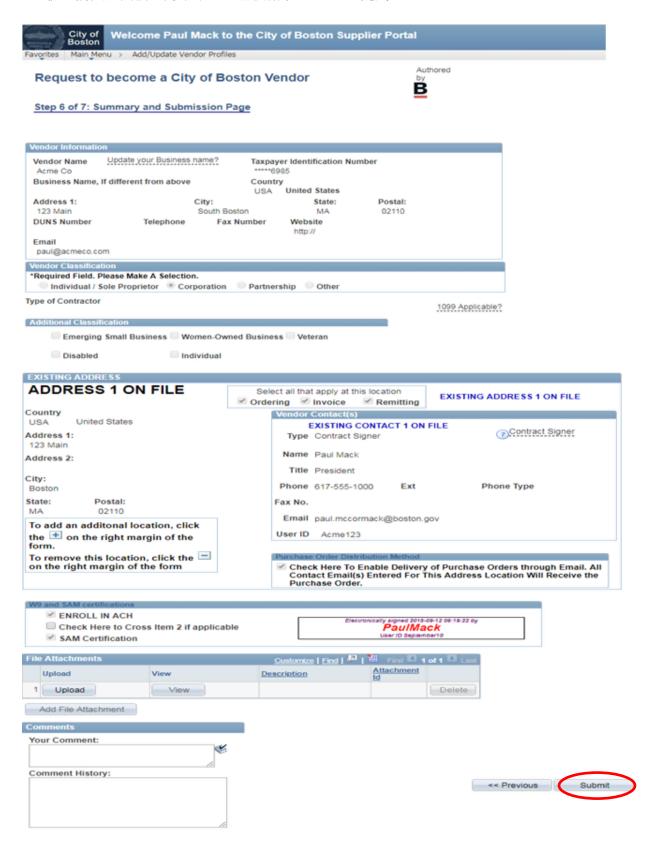
Step 5 of 7: SAM Certification

The City of Boston will not enter into a business relationship with persons or entities currently debarred or suspended from procurement by the federal or state government or the City of Boston.

By checking this box, I certify that the person or entity identified as the Vendor on this eForm is not debarred, suspended, proposed for debarment, or otherwise declared ineligible from doing business with the federal or state government or the City of Boston, and that such person or entity is not listed as a debarred or excluded party under the federal government's System for Award Management (<a href="http://www.sam.gov">http://www.mass.gov/anf/budget-taxes-and-procurement/procurement/procurement/procurement-info-and-res/conduct-a-procurement/procurement-considerations/vendor-debarment.html">http://www.mass.gov/anf/budget-taxes-and-procurement/procurement/procurement-info-and-res/conduct-a-procurement/procurement-considerations/vendor-debarment.html</a>)



8. 檢查摘要頁面信息的準確性, 然後點擊 "Submit - 提交"。



9. 您的供應商電子表格將被提交給到我們的審計部門審核。重新審核,您將收到電子郵件通 知您更改已經完成。



#### PaulMack on PSFNSP2

Favorites Main Menu > Department Self Service > COB Vendor eform

## Request to become a City of Boston Vendor

Authored by

Step 7 of 7: eForm Successfully Submitted

Operator ID: Acme123

Operator ID Description: PaulMack

Form Submission Date: Monday at 02:24 PM September 10, 2018

Form Submission Type: Update to Vendor Profile - Vendor ID: 0000089168

Form Status: Pending

Thank you. Your eForm is complete and submitted. City of Boston Staff will review your form and notify you of the status.

View This Form

Return to eForm Home Page

如果您有任何問題,請隨時致电供應商門戶支援部 617-635-4564 聯繫。您也可以發送電子郵 件至 vendor.questions@boston.gov 與我們聯繫。

感謝您使用供應商門戶網站!