SUPPLIER REGISTRATION FORM

To complete your supplier information file with St. Petersburg College please complete and return this document to SPCPurchasing@spcollege.edu
ATTN: Karen Reynolds, Director of Procurement & Asset Mgmt
Thank you

Business Name	
Mailing Address	
(Street/P.O. Box)	
(Street/F.O. BOX)	
City	
State	
Zip	
County	
Contact Person	Title
Contact Ferson	Title
Telephone #	Fax #
Email Address	
Website Address	
Type of business/service offered	
Is your company certified by the State of Florida's Office of Supplier Diversity as a Minority/Woman Owned	
Business? YES NO	
Is your company certified as a Minority/Woman Owned Business by another entity YES NO	
If yes to either please include a copy of the certification	

St. Petersburg College PO Box 13489 St. Petersburg FL 33782