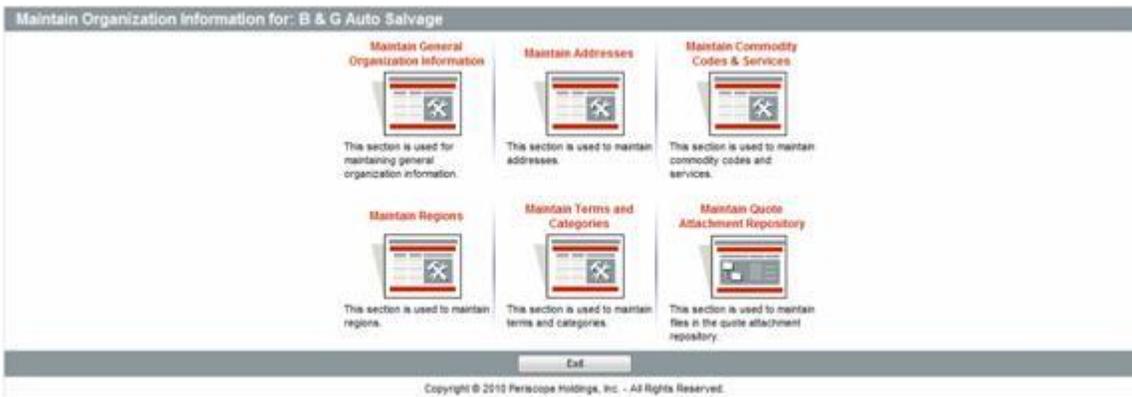# Maintain Organization Information:

Selecting the Maintain Organization Information icon allows you to access all of the vendor organization's information as it was registered with the agency, including links to address, URL links, terms, categories, and commodities:

Maintain General Organization Information:

Select the **Maintain General Organization Information** icon to maintain the organization's default information, including name, business description, emergency contacts and any attachments (like a company brochure) that need to be at the Organization level.

The fields for this form are described below:

Vendor ID	This field displays the vendor id for the current vendor record. This number cannot be modified.
Alternate ID	This field can be used to enter in an additional ID for the vendor (to cross reference, for example).
Company Name*	Enter or modify the vendor company name. This is a required field.
Vendor Legal Name	Enter or modify the vendor company's vendor legal name. This is a required field.
DBA for Vendor	This is the "doing business as" for vendor ID. This is a protected field.
Status	Active, Deleted, Inactive or Pending may be chosen.
Status Change Reason	This is required when a vendor status is changed.
Tax ID#*	Enter or modify the vendor Tax ID #. This is a required field.
Is Tax ID # an Employer Identification Number (EIN) or a Social Security Number (SSN)?	Choose which type of Tax ID is used when registering. In most cases, an Employer Identification Number is used, but in the instance of an individually owned business, a Social Security Number may be used.
Country Code for Tax ID	Designates the country the Tax ID is for. If US, Tax ID must be 9 digits.
Incorporation Details	Use the dropdown menu to select a state and enter the year of incorporation for the current vendor.
Business Description	Enter or modify a short business description for this vendor.
Preferred delivery method	Select a preferred vendor notification method.
Vendor Email	Enter the vendor's email address in order to contact the vendor by email.
Vendor Fax	This field is for the vendor fax number.
In Compliance	Used to designate vendors 'In Compliance' according to the agency standards.
1099 Vendor	Designates verified 1099 vendors.
Comments	Use this field to enter additional information to this vendor record. This is a note field and not displayed to the vendor when viewed by the vendor users.
Emergency Supplier	Select the **Yes** button to designate the vendor as an emergency supplier who can deliver with short lead times, outside of standard work hours, and in cases of disaster.
Emergency Phone*	The phone number used to reach the vendor in emergency situations. This is a required field only if the vendor is marked as an Emergency Supplier.
Emergency Contact Name*	The contact name associated with this emergency supplier. This is a required field only if the vendor is marked as an Emergency Supplier.
Emergency Email*	The email address associated with this emergency supplier. This is a required field only if the vendor is marked as an Emergency Supplier.
Emergency Info Comment	Enter additional information about the Emergency Supplier.
Reference Vendor	This checkbox indicates that the vendor was originally entered as a one-time referenced bidder through a requisition.
Attachments	This field appears only if vendors are permitted to add attachments (See Administer Vendor System)

Select **Save** to submit the modified vendor record.

Maintain Addresses:

The **Maintain Addresses** option allows the agency to maintain, or add, the vendor's various addresses that are registered with the agency.

Name	Address Type	Address Information	Status	Default for Type
Edit	General mailing address:	DEAN MITCH 19400 S FATHERWAY VAIL, AZ 85714 Email: rlu@goperiscope.com Phone: (520)574-3103	Active	Yes

Maintain Addresses for: BEARD & SHARPLEY ENT INC

Add Another Address   Exit

Edit an Existing Address:

In the **Name** field, click on the **Edit** link.

Address Book - BEARD & SHARPLEY ENT INC

General mailing address

Name this Address*:	
Contact Name*:	DEAN MITCH
Address Line 1*:	19400 S FATHERWAY
Address Line 2:	
Address Line 3:	
Address Line 4:	
Country*:	
City*:	VAIL State/Province*: AZ
ZIP*:	85714 County:
Phone*:	520 222 3103 Ext:
FAX:	Email*: rlu@goperiscope.com
EDI Address:	
Status:	Active
☑	Default address for this address type

Save & Exit   Save & Continue   Reset   Cancel & Exit

Once you have made changes, click **Save & Exit** to submit the record.

Add Vendor Address:

When a vendor address needs to be added, click the **Add Another Address** button on the Maintain Addresses window. There are four address types to choose from: Bid Mailing Address, Emergency Mailing Address, Purchase Order Mailing Address, and Remit Address. There can be as many addresses as the agency wants for each type, but each type will have one address as the default. For instance, there may be two PO Mailing Addresses, but when creating a PO, only the default will appear on the purchase order. However, the other address can be selected at that time if desired.

Complete the new address information and click **Save**. An asterisk identifies required fields. Fields without an asterisk are optional entry fields. Use the Tab key to advance to the next field, or click in the field with the left mouse button.

Enter information into the vendor New Address fields (asterisks denote required fields):

Address Type*	Select the type of address (Emergency Contact, Bid Mailing, PO Mailing, Remittance). This is a required field.
Address Name*	Enter a descriptive name for the address (i.e. Corporate, Bids, POs, etc). This is a required field.
Contact Name*	Enter the primary contact person for this address. This is a required field.
Address Line 1* Address Line 2 Address Line 3 Address Line 4	Enter the first line of the street address. This is a required field. Lines 2, 3 and 4 are not required fields.
City*	Enter the city for the address. This is a required field.
State/Province*	Enter the state or province for the address. If you are not a US or Canadian user please select 'NONE'. An agency representative may contact you for further details. This is a required field.
ZIP*	The ZIP code. US customers please use either ##### or #####-#### format. Canadian customers please use a#a-#a# format. If you are not a US or Canadian user please '00000'. An agency representative may contact you for further details. This is a required field.
County	The county. This is not required field.
Country	The country. This is not a required field.
Phone/Extension*	The phone/extension associated with this address. This is a required field.
Email*	The email address associated with this address. This is a required field.
Fax	The fax number associated with this address. This is not a required field.