

Dear City of Minneapolis Vendor,

In an effort to improve our Accounts Payable processes which includes centralizing our invoices in A/P, becoming more paperless, and expediting payments to our vendors, we are implementing a process to scan vendor invoices into our document imaging system before they are paid. By doing so we will be able to provide faster visibility of the invoices for City staff to review and approve, by electronically routing invoices. These changes will let us speed up the payment process which will enable quicker payments to vendors.

## What you need to do:

- **Send invoices by e-mail (preferred)** or **Send invoices by U.S. Mail**
  - To send by e-mail, send to [submitinvoices@minneapolismn.gov](mailto:submitinvoices@minneapolismn.gov)
    - You must attach an image of the invoice or statement to your email and the image must be in .PDF format to be processed
    - You may send more than one invoice per e-mail, however each pdf document can contain only one invoice. If there are additional documents related to the invoice or statement, then they need to be included in the .PDF image as subsequent pages.
    - Information provided in the body of your e-mail will not be looked at
  - To send by U.S. Mail, send invoices to: City of Minneapolis – Accounts Payable PO Box 211208 Eagan MN 55121
  - Please update your invoices with this information in the “Bill To” section of your invoice.
- 1) Please include, on every invoice, as many of these identifying information pieces, in the Purchase Order Box on your invoice, as possible:** Be sure to ask for this information from the City of Minneapolis employee when the order is placed.
- Purchase Order Number – **Most important** (6 digits) please enter the correct PO Number for each purchase. Do not enter an old PO Number or a PO Number for another purchase as this will delay payment.
  - Department of contact person making the purchase
  - Last name of City of Minneapolis contact making the purchase
  - Contract Number - if there isn't a PO Number to provide

Failure to include proper identification on your invoices may result in:

- Delayed payment.
- Rejection of an invoice that will be sent back to you for proper information.

With your cooperation by providing the proper identification on the invoice, we can improve our service to you and better expedite your payments.

If you have questions, please contact the Accounts Payable group; Rich Perrizo at 612-673-2311, Jean Poppen at 612 673-3264, or Vern Hyvare in Purchasing at 612 673-5765.

Vendor ID

# Vendor Application City of Minneapolis

[Print Form](#)

For policies on how to submit an invoice to the City.

**Form Instructions:**

Refer to: [http://www.minneapolismn.gov/finance/procurement/procurement\\_compassvendor\\_index](http://www.minneapolismn.gov/finance/procurement/procurement_compassvendor_index)

The City requests that all Vendors provide an e-mail address for general correspondence. In addition each vendor should provide an e-mail for Purchase Order Notification and e-mail for Payment Advises Statements to be sent to the vendor accounts receivable department.. For Vendors that do not have multiple departments, the same e-mail can be used . Please provide a general e-mail address and refrain from using individual sales or accounting personnel since often these contacts change.

The City encourages all Vendors to sign-up for ACH/EFT automatic deposit providing access to your payment funds from the City more quickly. **Once the application including a W-9 is received . Your organization will be assigned a Vendor ID allowing you to conduct business with the City.** Thank you for your cooperation in completing the application. For any questions regarding the application process contact (612) 673-5108 for assistance.

**Submit completed application to:** [accountspayable@minneapolismn.gov](mailto:accountspayable@minneapolismn.gov) Fax (612) 673-2042 Mail to address below.

City of Minneapolis Accounts Payable, Attn: Vendor Maintenance 350 South 5th Street Room 325M Minneapolis MN 55415-1315

**Section 1. Vendor Contact Information** For Non-Profit organizations, please also include additional information in Section 1 Part D.

Business Name or Payee:

Date of Application

**A) Vendor Contact Information**

Business Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Main Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

**B) Vendor Payment Remittance Address**

Business Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Payment Advise Email: \_\_\_\_\_

**C) Vendor Purchasing Address**

Business Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Purchase Order Email **D) Non-Profit Organization**

Executive Director: \_\_\_\_\_ Fiscal Year End MM/DD: \_\_\_\_\_

Date organization received non-profit status from IRS: \_\_\_\_\_ Subject to A-133 Audit:  YES  NO

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Controller: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Section 2. Legal Entity**

- U.S Partnership
- U.S Corporation State Incorporated \_\_\_\_\_
- Individual/Sole Proprietorship
- Limited Liability Corporation
- 501C Not For Profit
- Local or State Government Agency
- Education Institution
- Foreign Corporation Country \_\_\_\_\_
- Foreign Government Organization
- Foreign Partnership

**Section 3. 1099 Reporting Classification**

- Attorney or Legal Firm
- Physician or Medical/Health Care Provider
- Rent

**Section 4. Vendor SIC/NAICS Codes**

Refer to <http://www.sba.gov/size/>

to look up NAICS Codes assigned to your type of business.

Description of Type of business \_\_\_\_\_

SIC/NAICS Code Assigned \_\_\_\_\_

**Section 5. State/Federal Classification**

- SBA 8(a) Certification
- Small Disadvantaged Business Certification
- HubZone Certification
- Women Owned
- Minority-Owned Business

**Section 6. Certified Business Enterprise (CERT)**

- African American
- Hispanic
- Asian/Pacific Islander
- Native American
- Non-Minority Female
- Non-Minority Small

**Section 7- Payment Preference**

Delivery method you prefer to receive payment?

- Check  ACH/EFT (refer to Enrollment Section 9.)
- Already registered with City for ACH/EFT

**Section 8- Authorization for Debit Memo**

Vendor authorizes City to issue debit memo for discrepancy on invoice; e.g. quantity shipped, vs. quantity received, invoice different from Purchase order, tax adjustment etc.

- Yes  No

**Section 9 – ACH/EFT Enrollment**

As part of the City of Minneapolis continuing efforts to efficiently process our vendor payments and lower our processing costs, the City has implemented an ACH/EFT disbursement program for the payment of vendor invoices.

**Why Should Your Company or Organization Enroll?** By participating in this program, you can eliminate waiting in long lines at your bank and gain the benefit of a quicker deposit to your company's account. Not only does it free your staff's time, but an ACH payment gives you access to the money more quickly, rather than having to wait for a check deposit to clear. We encourage all of our vendors to join the City of Minneapolis ACH/EFT disbursement program and enjoy the benefits of a no-hassle payment process and quicker access to your money.

**How Does It Work?** You will be notified when you will begin receiving payment via ACH/EFT. You will continue to submit your invoices in the same manner for approval and processing.

**Name of Finance Institution** \_\_\_\_\_ **Address:** \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_

Account Type:  Savings  Checking

Bank Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**AGREEMENT**

I hereby authorize and request the City of Minneapolis to initiate credit entries, and, if necessary, a debit entry in accordance with NACHA rules for reversing a credit entry made in error, to my account at the financial institution named above. Upon a need for a reversing entry, the City of Minneapolis will communicate with you in advance to arrange repayment. The electronic payment data remains in effect until withdrawn by:

- (a) Written notification to the City
- (b) My death or legal incapacity
- (c) The financial institution or Signature \_\_\_\_\_ Date \_\_\_\_\_
- (d) City of Minneapolis Name \_\_\_\_\_ Title \_\_\_\_\_

**Agreement Requires Signature & Date To Be in Effect**

**I certify that the information supplied on vendor application is correct to the best of my knowledge. I further certify that in doing business with the City of Minneapolis my firm is in compliance with policy relating to conflict of interest.**

Conflict of Interest policy available at: [http://www.minneapolismn.gov/finance/procurement/procurement\\_compassvendor\\_index](http://www.minneapolismn.gov/finance/procurement/procurement_compassvendor_index)

Name of Person Completing/Authorizing Vendor Application \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

*Send Vendor Application along with a completed W-9 Form back to the City staff person you are coordinating the purchase with.*

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

### Part II Certification

Under penalties of perjury, 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 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. citizen or other U.S. person (defined below).

**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. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

**Source: Minneapolis Code of Ordinances**

**15.40. Conflicts of interest.** (a) Definition of conflicts of interest. A local official or employee, whether paid or unpaid, shall avoid any situation that might give rise to a conflict of interest. A conflict of interest is present when, in the discharge of official duties, a local official or employee participates in a governmental decision, action or transaction in which he or she has a financial interest, except when that financial interest is no greater than that of another member of his or her business classification, profession or occupation or in matters involving city litigation when that financial interest is no greater than that of another member of the public impacted by the litigation. A financial interest is any interest, including loans, which shall yield, directly or indirectly, a monetary or other material benefit to the local official or employee (other than monetary or material benefits authorized by the city). A financial interest of a local official's or employee's employer (other than the City of Minneapolis), his or her associated business, or his or her spouse, domestic partner, or dependent, and their employers or associated businesses shall also be considered a financial interest of the local official or employee. The following assets shall not be considered a financial interest for purposes of this section:

- (1) Ownership of shares in a diversified mutual fund.
  - (2) Membership in a pension plan or employee benefit plan.
  - (3) Ownership of bonds or publicly traded securities with a market value of less than two thousand five hundred dollars (\$2,500.00).
  - (4) Ownership of a whole life insurance policy.
- (b) Addressing conflicts of interest. To address conflicts of interest:
- (1) A local official or employee shall not participate in making or attempt to use his or her position to influence any city governmental decision, action, or transaction in which the local official or employee knows or has reason to know that he or she has a conflict of interest. To participate or participation means making the decision, taking action, entering into a transaction, providing advice or a recommendation, introducing, sponsoring, debating, voting on, approving, and investigating the decision, action, or transaction. Participation includes the direct and active supervision of the participation of a subordinate in the matter. Participation is more than official responsibility, knowledge, perfunctory involvement, or involvement on an administrative or peripheral basis.
  - (2) A local official or employee may participate in a city governmental decision, action, or transaction involving an

organization or entity when the local official or employee, or his or her spouse, domestic partner, or dependent is an officer, director, board member, or trustee, if the local official or employee does not have a financial interest in the governmental decision, action, or transaction. However, the local official or employee must disclose his or her affiliation with the organization or entity as though it were a conflict of interest. A local official or employee may participate in a city governmental decision, action, or transaction when the local official or employee has a financial interest in a matter involving city litigation but that financial interest is no greater than that of another member of the public impacted by the litigation. However, the local official or employee must disclose his or her financial interest in the litigation as though it were a conflict of interest.

- (3) A local official or employee may participate in a city governmental decision involving a related person, other than his or her spouse, domestic partner, or dependent, if the local official or employee does not have a financial interest in the governmental decision, action, or transaction. However, the local official or employee must disclose his or her relationship with the related person as though it were a conflict of interest.
- (4) Any lobbyist (other than an employee of the city) who is lobbying on behalf of the city must disclose a complete list of the principals represented by that lobbyist or other lobbyists in the same firm, along with the project or projects on which lobbying is expected to occur on a principal's behalf, to all elected officials of the city and the city clerk. The ethics officer will report to the intergovernmental relations committee on what projects, if any, create, or may create a professional conflict of interest for the lobbyist. A professional conflict of interest is a situation where the interests of a principal of the lobbyist are or may be adverse to the interests of the city. The lobbyist must update the list any time there is a change in his or her list.

(c) Disclosure of conflicts of interest. If a local official or employee, in the discharge of his or her official duties, recognizes that his or her participation would create a conflict of interest, the local official or employee shall disclose the conflict of interest as follows:

- (1) The mayor and members of the city council shall disclose the conflict of interest to each other as soon as they become aware of the conflict. If such official becomes aware of a conflict during a meeting of the city council, or one (1) of its committees, or the executive committee, the official shall immediately disclose the conflict of interest orally. The mayor or

city council member shall also prepare, on a form prescribed by the city clerk, a written statement describing the matter requiring action or decision and the nature of his or her conflict of interest. The written statement shall be distributed to the mayor and the members of the city council and filed with the city clerk. After the first time the official has orally disclosed a conflict of interest and filed the form, the elected official may subsequently orally disclose a conflict by referring to the form. Because the mayor or city council members may not attend all city council or committee meetings, oral disclosure may consist of the written statement being read into the record by the presiding officer at the first regular meeting of the city council after the form has been filed.

- (2) A department head shall disclose a conflict of interest to the mayor and the city council by preparing, on a form prescribed by the city clerk, a written statement describing the matter requiring action or decision and the nature of his or her conflict of interest. The form shall be distributed to the mayor and the members of the city council and filed with the city clerk.
- (3) A local official who is not an employee and who is not covered by paragraphs (1) and (2) above shall disclose a conflict of interest to the other individuals on the agency, authority or instrumentality as soon as the local official becomes aware of the conflict. If a local official becomes aware of a conflict during a meeting, the local official shall immediately disclose the conflict of interest orally. The local official shall also prepare, on a form prescribed by the city clerk, a written statement describing the matter requiring action or decision and the nature of his or her conflict of interest. The written statement shall be distributed to the mayor and city council, any department head whose jurisdiction or agency could be affected, and filed with the city clerk.
- (4) An employee who is not covered by paragraphs (1), (2) or (3) above shall disclose a conflict of interest (i) orally to his or her supervisor; and (ii) in writing as described below. If there is no supervisor, an employee shall disclose a conflict of interest in writing as described below. An employee who is required to disclose a conflict of interest in writing under this paragraph (4) shall prepare, on a form prescribed by the city clerk, a written statement describing the matter requiring action or decision and the nature of his or her conflict of interest. The written statement shall be distributed to the employee's immediate supervisor and department head, and filed with the city clerk.
- (5) All initial written statements required by this section shall be

filed not later than June 1, 2003. Thereafter, they shall be filed and distributed within one (1) week after the local official or employee becomes aware of the conflict of interest.

- (6) If the local official or employee has a supervisor, the supervisor shall assign the matter, if possible, to another person who does not have a conflict of interest. If they have no immediate supervisor, the local official or employee shall remove himself or herself from participating in the action or decision in question. If the local official is a member of the city council or the mayor, the local official shall not participate in any discussion or vote on any matter involving the conflict of interest. Although the mayor or city council member must abstain from voting on the matter, he or she shall be counted present for purposes of a quorum. (2003-Or-034, § 1, 3-21-03; 2007-Or-066, § 1, 8-31-07; 2009-Or-033, § 1, 4-24-09)