



DFA Stamp here

SHARE State Employee Vendor Registration

TYPE OR PRINT NEATLY

- The form must be completed by the Employee Only.
- An employee seeking reimbursement from the State must complete this form in order to be established as a vendor in SHARE. Reimbursement payments can then be authorized and processed through SHARE.
- This form must be submitted to the Vendor Relations Section of the Financial Control Division for entry into SHARE.
- Also submit this form for legal name changes due to marriage or divorce or change of field office address.
- To add or update ACH/Direct Deposit banking information, attach a copy of a check or letter from your bank verifying your banking information. The Vendor Relations Section will NOT ENTER banking information into SHARE without a method to verify this information.
- Warrants and advices will only be sent to the employees field office address and not to the employee's home address.

CHECK THE APPROPRIATE BOX		<input type="checkbox"/> ADD Direct Deposit (Fill section 1, 2, 4, 6 - 8)	1) State of NM Employee (6-digit Employee/HCM #)	
<input type="checkbox"/> NEW EMPLOYEE request (Fill section 1, 2, 4, 6 - 8)	<input type="checkbox"/> CHANGE Direct Deposit (Fill section 1, 2, 4 - 8)			
<input type="checkbox"/> CHANGE Employee Name (Fill section 1 - 4, 8)	<input type="checkbox"/> CHANGE Employee Address (Fill section 1, 2, 4, 8)			
2) EMPLOYEE LEGAL NAME As registered with IRS or SSA		Last Name	First Name	Middle Initial
3) NEW EMPLOYEE LEGAL NAME		Last Name	First Name	Middle Initial
4) EMPLOYEE FIELD OFFICE ADDRESS Either a Post Office Box or Street Address but NOT BOTH (NM State Employees should NOT provide their home address)				
FIELD OFFICE LOCATION NAME				
FIELD OFFICE PHYSICAL ADDRESS				
City		State	Zip	
OPTIONAL DIRECT DEPOSIT (ACH)				
Warning: The State of New Mexico will not process international ACH Transactions (IAT). If any payment to you from the State will ever result in an IAT under National Automated Clearing House Association (NACHA) operating rules or if you are not sure if the rules apply to you DO NOT FILL OUT THIS SECTION OF THE FORM. The State of New Mexico will only setup ACH information for checking accounts.				
5) PREVIOUS BANKING INFORMATION			6) NEW BANKING INFORMATION	
Bank Name			Bank Name	
Bank Routing No. (9-digit ABA#)	Bank Routing No. (9-digit ABA#)	Bank Account Number	Bank Routing No. (9-digit ABA#)	
7) I acknowledge the IAT warning and authorize the State of New Mexico to initiate direct deposit of funds to the account and financial institution indicated, and to recover funds deposited in error if necessary in compliance with NACHA regulations. <i>(Employee must print, sign and provide a copy of a voided check or letter from bank confirming information confirming your banking information in order for direct deposit to be created or changed.)</i>				
Printed Name			Signature	
8) I Authorize DFA to enter the above information into SHARE to permit the reimbursement payments to me. <i>(Employee must be sign in order for vendor file to be created or changed)</i>				
Signature			Date	
OFFICIAL / POC USE ONLY			DFA / FCD USE ONLY	
BUSINESS UNIT	DATE	POC INITIALS	ENTERED BY	VENDOR NUMBER
POC (Print name)		PHONE NUMBER	DATE ENTERED	ACH VERIFIED

Instructions for completing this form

This form substitutes for the IRS W-9 form. Complete this form if you will receive payment from the State of New Mexico and/or you are a vendor who provides goods and services to the State of New Mexico. To comply with the Internal Revenue Service (IRS) regulations regarding 1099 reporting, the State of New Mexico is required to collect the following information to be completed on the Substitute W-9 form. The information collected on this form will allow the State to confirm that our records contain the official name of your business, the Tax Identification Number (TIN) that the IRS has on file for your business and business type.

Check the appropriate box(s) that this form is to be utilized and fill in the corresponding section(s) indicated next to the box(s) checked.

- 1) **Taxpayer Identification Number (TIN#)** Is always a 9-digit number. Provide the Social Security Number (SSN) assigned by the Social Security Administration (SSA) or the Federal Employer Identification Number (FEIN) assigned to the business or other entity by the Internal Revenue Service (IRS). Check the appropriate box to indicate if you are providing an SSN or FEIN.
 - 2) **NEW TIN#** Provide the new number assigned by the SSA or the IRS and enter the effective date of the change.
 - 3) **NM CRS ID#** (optional) is always an 11-digit number that is provided by the New Mexico Taxation and Revenue Department.
 - 4) **Current Legal Name** When changing name, enter the current legal name. As registered with the IRS or Social Security Administration.
 - 5) **NEW Legal Name** Enter the new legal name. As registered with the IRS or Social Security Administration.
 - 6) **Current DBA/Trade Name** Individuals leave blank. Sole Proprietorships: Enter DBA (doing business as) name. All Others: Complete only if business name is different than Legal Name.
 - 7) **NEW-ADD DBA/Trade Name** Enter the name of the new or additional doing business as.
 - 8) **Primary Address** Where correspondence, payment(s), purchase order(s) or 1099s should be sent. If primary has changed check the box that indicates "CHANGE."
 - 9) **Remittance Address** Where payment(s) should be sent if different from primary address. If address has changed check the box that indicates "CHANGE." NOTE: State agencies please indicate the SHARE Loc.# in spaces provided. When providing a Community Development Block Grant (CDBG) remittance address, provide bank name in address line #1 and physical address in address line #2.
 - 10) **Entity Designation** Check ONE box which describes business entity. *For LLC entities, you must check the type of LLC.*
 - 11) **Entity Activity** Specify in the spaces provided next to the activity listed with an "A" to add or "D" to delete if the entity provides one of the activities listed. If entity provides none, leave blank.
 - 12) **Certification** By signing this document you are certifying that all information provided is accurate and complete. The person signing this document should be the partner in the partnership, an officer of the corporation, the individual or sole proprietor noted under legal name above, or the New Mexico State Employee for which the vendor account is established.
- Optional Direct Deposit (ACH)** You may elect to receive payments from the State of New Mexico through Automated Clearing House (ACH) direct deposit. Please provide the Bank Name, Bank Routing No (9-digit-ABA) and Bank Account Number. The State of New Mexico will only setup ACH information for checking accounts. Please provide a copy of a voided check or letter from your bank confirming the banking information you are providing. Without providing this information and providing a copy of a voided check or letter from your bank the direct deposit WILL NOT be setup on the vendor file.
- 13) **Previous Banking Information** Provide the complete banking information previously listed with the State of New Mexico.
 - 14) **NEW Banking Information** Provide the NEW banking information.
 - 15) **I Acknowledge** Print name and sign to acknowledge the IAT warning and to authorize the State of New Mexico to initiate direct deposit of funds to your financial institution provided.

Privacy Act Notice Section 6109 requires you to furnish your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and other certain income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, or contributions you made to an IRA. The IRS uses the TIN for identification purposes and to help verify the accuracy of your tax return. You must provide the TIN whether or not you are required to file a tax return. Payers must generally withhold a percentage as determined by the IRS of taxable interest, dividend, and certain other payments to a payee who does not furnish a TIN to a payer. Certain penalties may apply.

Penalties If you fail to furnish your correct Taxpayer Identification Number (TIN) to a requester, you are subject to an IRS penalty of \$50 for each failure unless your failure is due to a reasonable cause and not to willful neglect. If you make a false statement without a reasonable basis that results in no backup withholding, you are subject to an IRS penalty of \$500. Willfully falsifying certification or affirmation may subject you to criminal penalties including fines and/or imprisonment. If the requestor discloses or uses TINs in violation of Federal Law, the requester may be subject to civil penalties and imprisonment.