

### UI Department Requesting Information



Hover over ?  
for additional information

This section is to be completed by the requesting department prior to sending form to the vendor/2nd Party.  
Forms without this section completed will not be processed.

Today's Date \_\_\_\_\_

U of I Department Name College of Applied Health Sciences

Contact Person Elaine Nicholas

Phone Number 312-996-2079 E-mail enichlas@uic.edu

Campus  Chicago  Springfield  Urbana/Champaign

Transaction  No Fund/Receivable Contract Only

If you are selecting "No Fund/Receivable Contract only", UI encourages you to select "Purchase Order/Payable Contract" if there is any possibility UI will pay the 2nd party in the future to avoid the need to resubmit the form.

New 2nd Party  Update Existing 2nd Party

### Non-Vendor Second Party Information Form

In order to complete this form you must have Adobe Reader or Adobe for Mac version 9 or higher.  
If you do not, please go to [Adobe.com](http://Adobe.com) and download the latest version of Adobe Reader or Adobe for Mac.

#### Receivable Information

Individual  Legal Entity (e.g. Corporation, Sole Proprietor, Limited Liability Corporation)

Name of Individual or Legal Entity \_\_\_\_\_

Doing Business as (if applicable) \_\_\_\_\_

Permanent Residence/Legal Entity Address \_\_\_\_\_

City \_\_\_\_\_ State/Province/Region \_\_\_\_\_

Zip Code/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Legal Entity Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

#### Certification and Signature

I certify that the information contained herein is correct.

**Second Party Signature or Authorized Agent** (This form is not considered valid unless signed and dated)

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Users will be prompted to create an Adobe certificate-based digital approval. Upon signing you will be asked to save a copy of the form for your records. If you have not used a digital approval before, reference the document, [Setting up your Adobe Digital Signature/Approval](#), to assist you. This is a one-time process. Once you have created a digital approval it can be used in other Adobe-based applications.

#### Submission Instructions:

**Documents must be signed and dated.**

Return this form directly to the Vendor Maintenance Group. If you have additional documents to submit, please contact the department with which you are working for submission instruction.

or **Mail:** Vendor Maintenance Group or **Fax:** (217) 239-6850  
Illini Plaza Bldg, Suite 210, MC-660 You do not need to mail a hardcopy.  
1817 S. Neil Street  
Champaign, IL 61820