



# District of Columbia Courts Oracle Supplier Request Form



Date: \_\_\_\_\_ Requestor: \_\_\_\_\_ Request Type: \_\_\_\_\_

## Budget and Finance Division Use Only

SAM Registration Waived, FAR Clause: \_\_\_\_\_ SAM Waiver Approver: \_\_\_\_\_

Supplier Classification: \_\_\_\_\_ Supplier Type: \_\_\_\_\_

DCC Service Type: \_\_\_\_\_ Pay Group: \_\_\_\_\_

Payment Terms: \_\_\_\_\_ Approver: \_\_\_\_\_

## PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 332 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

## Required Information from All Suppliers

Supplier Name:			
DUNS Number:		Cage Code:	
Taxpayer ID:			
ALC (if Federal):			
Trading Partner ID: (if Federal)			
Mailing Address:			
Bank Name:			
Bank Routing Number (ABA):			
Bank Account Number:			
Checking/Savings:			

## Additional Information Required from Defender Services Suppliers Only

### Type of Service Provider:

Attorney (Bar Number): \_\_\_\_\_ Non-Attorney (Identify): \_\_\_\_\_

DC Courts Web Voucher System (Select Program):      CJA      CCAN      Probate      CRRD

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

## Optional Information:

Alternate Name:	
Telephone Number:	
Contact Info:	
E-mail Address:	

## IBC Use Only:

The above information has been added/updated into Oracle and data input verified for accuracy according to procedures.

Data input by: \_\_\_\_\_ On date: \_\_\_\_\_

Passed verification by: \_\_\_\_\_ On date: \_\_\_\_\_

Verification Notes (include initials/date for each entry): \_\_\_\_\_

## Instructions for the DC Courts Oracle Supplier Request Form

**All DC Courts suppliers are required to set up and maintain an active SAM registration by May 2018.**



**TIP:** If you already have a DUNS Number and an active System for Award Management (SAM) registration, Complete only the “Supplier Name” and “DUNS Number” fields.

Suppliers who are not registered with SAM may follow the link below for a quick guide and instructions on SAM registration. There are no fees associated with obtaining a DUNS number, registering your entity with SAM, or maintaining your registration.

[https://www.sam.gov/sam/transcript/Quick\\_Guide\\_for\\_Contract\\_Registrations.pdf](https://www.sam.gov/sam/transcript/Quick_Guide_for_Contract_Registrations.pdf)

Suppliers who are already registered with SAM may follow the link below for a quick guide and instructions on updating and renewing their registration.

[https://www.sam.gov/sam/transcript/Quick\\_Guide\\_for\\_Updating\\_or\\_Renewing\\_CCR-SAM\\_Registrations.pdf](https://www.sam.gov/sam/transcript/Quick_Guide_for_Updating_or_Renewing_CCR-SAM_Registrations.pdf)

### Required Information:

<b>All Suppliers</b>	Supplier Name	The official name of the supplier. This name will be used on printed checks, if the supplier is not paid via EFT, and on 1099 or other IRS forms.
	DUNS Number	The supplier’s DUNS number. If the supplier does not have a DUNS number, a supplier code will be assigned when the data is entered to the system. (SAM waiver exception will be needed)
	Cage Code	Provide the Cage Code with your DUNS number if you have multiple sites associated with your SAM registration.
	Taxpayer ID	The supplier’s taxpayer Identification number (TIN or SSN).
	Supplier Type	Federal is for federal government agency only. Non-Federal is for all other supplier types not specified (i.e. not an employee, not a non-employee traveler).
	ALC (if Federal)	Federal Agency’s ALC.
	Trading Partner ID (if Federal)	Federal Agency’s Trading Partner ID.
	Mailing Address	An address is required for all suppliers, even those paid via EFT. Enter the full address of the supplier: Street Address, City, State and Zip Code. If a foreign country, include Province and Postal Code as appropriate.
	Bank Name	The name of the supplier’s bank.
	Bank Routing Number	The routing number (ABA number) for EFT deposits to supplier’s bank.
	Bank Account Number	The supplier’s bank account number.
	Checking/Savings	C – Checking or S – Savings
<b>Defender Services Suppliers Only</b>	Attorney’s Bar Number	The attorney’s bar number must be recorded for use in the Web Voucher System.
	Non-Attorney (Identify)	Use the dropdown menu to identify the service being provided to the Courts. If your service is not listed, type the service in this field.
	Web Voucher Subsystem	Select the radio button associated with the panel for which you will be providing services (you may choose more than one).
	Email Address	You must provide a valid e-mail address to receive official Court business communications.

### Optional Information:

	Alternate Name	This field is used for query or secondary reference purposes only. You may enter another name for this supplier; for example, when a company uses a DBA.
	Telephone Number	The main telephone number for this supplier.
	Contact Info	Name, Title, and Telephone Number of supplier contact.
	E-mail Address	Record supplier’s e-mail address. This field may be used to send remittance advice information to the supplier via email (for clients who have selected to use this feature).