SLAC Payee Registration

Getting Started Helpful Information

- What is a Payee?
 - > A payee is a person receiving a tax reportable payment
- Who should register here?
 - > Anyone receiving a Stipend or Honoraria should register on this site.
- What do I need to get started?
 - For Automated Clearing House (ACH) direct deposit payments you will need your bank account and routing numbers
 - Your Social Security Number
 - For Honoraria only, you will need a completed W-9 IRS Tax Form
- Where can I find a W-9 IRS Tax Form?
 - Please visit the IRS webpage for the form and instructions: <u>https://www.irs.gov/pub/irs-pdf/fw9.pdf</u>
- Where can I find my bank account and routing number?
 - The bank routing number is exactly nine digits in length and is generally the first nine-digits in the lower left section of your check. The first two-digits of the routing number will begin with 01 through 12 or 21 through 32. View <u>sample check</u> for help in identifying routing and account numbers.
 - If you are unsure, contact your Bank to verify.
- Who do I contact for help?
 - If you have questions, please contact <u>ap@slac.stanford.edu</u>.

Welcome Page.

1. Go to <u>Registration Page¹</u>

2. Select NEXT

Note: The BUSINESS radial button is selected, the Individual radio button has been disabled. Your payee (non-supplier) status will be identified in a later step.

Favorites -	Main Menu 👻 > SLAC 👻 > 🛛 R	egister Suppliers				
					Home	Sign out
ORACLE						
Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit	
	, .			Evit 1 4 r	Draviaua Next	
Welcome - Ste	p 1 of 6				Previous	
	F					
To complete you	ur registration, please fill in the informati	on for each step of the r	registration process. Use the registration provided all the region	navigation buttons "Next" and	"Previous" to move the "Submit" step where you	
may submit you	r registration for consideration. You will	receive an email confin	mation shortly after submittal.	ulled Information, proceed to	the Submit step where you	
If you have any	questions or feedback on the registration	n process, please call t	he application processiong ser	rvice center at:		
650-926-2296 or email:						
Suppliers@slac	.stanford.edu					
**********	*********	******	****			
SLAC National	Accelerator Laboratory enforces Using	Strong Passwords				
* A strong pass	word must be at least 8 characters long.					
* It should not c * It should conta	ontain any of your personal information, ain characters from the four primary cate	specifically your real na gories, including; upper	ame, user name, email or ever rcase letters, lowercase letters	n your company name. numbers, and characters.		
Select an activ	ty bolow:	3,	,	,,		
Select all activ	ty below.					
• Start a new I	egistration form					
What type of	f entity do you represent?					
Busir	dual					
	duai					
Ocontinue fro	m where you left					
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* Required field					1011020	

1. https://erp-fsprdext.slac.stanford.edu/psp/fsprdext_1/SUPPLIER/ERP/c/SUP_OB_MENU.AUC_BIDDER_REGISTR.GBL?Action=U&SUP_OB_TEMPLATE_ID=SUPPLIER

Identifying Information.

- 1. Tax Identification Number: Provide your Social Security Number
- 2. Entity Name: Enter your Legal Name
- 3. Entity Organization Type: Choose from Honoraria or Stipend based on the reason for the payment
- 4. Add Attachment: For Honoraria only, attach a completed and signed IRS W-9 Form.

Favorites -	Main Menu 👻 > SLAC 👻 🗧	Register Suppliers			
					Home
Welcome	Identifying Informatio	n Addresses	Contacts	Payment Information	on Submit
				Exit	Previous Next
Identifying Inf	formation - Step 2 of 6				
Unique ID & Cor	mnany Profile				
onique ib a cor					
	* Tax Identification Number				
	* Entity Name			Add Company Logo	Add Attachment
	* Entity Organization Type				Aud Audonment
	Additional Name				
	Additional Name				
	http://URL			Open URL	
Profile Question	าร 🕐				

Add Attachment.

1. Upload: Honoraria only, attach the IRS W9 Tax Form,

2. Return to continue on the main registration page.

Note: Old versions will not be accepted, the latest version can be found on the IRS site:

https://www.irs.gov/pub/irs-pdf/fw9.pdf.



Profile Questions.

1. Complete the Profile Questions by entering Not Applicable "NA" or "No".

Note: These questions are used for supplier contractors and are not applicable to payees.

Profile Questions (2)	Pavees: Enter "Not Applicable" or "No" for eac	h auestion
* Description of Product Services(Please use Short Description)	Not Applicable	2
* Is your Company listed in SAM(www.sam.gov) ?	[] No	
CA License: (Only if Applicable)	Not Applicable	
* Are you a Small Business? If 'Yes' you are required to complete "Additional Address" Box below.	No 🗘	
Are you exempt from backup withholding? If 'No', please attach a completed W-9 form. The W-9 Form available at http://www.irs.gov/pub/irs-pdf/fw9.pdf.	[] No 🗘	
Do you have NAICS codes? If 'Yes' , please enter NAICS codes in the box "Standard Industry Codes".	V No C Yes	

Skip these sections

1. Select NEXT to continue.

Standard Industry Codes 👔		
US - NAICS Codes Description		
Q Add SIC Code		Î
Additional Reporting Elements 👔		
HUBZone Program Size of Small Business Veteran-Owned Small Business Sm Disadvantaged Business Prog Other Preference Programs	: If applicable, select one If applicable, select one : If applicable, select one If applicable, select one : If applicable, select one If applicable, select one : If applicable, select one If applicable, select one	Please check all that apply: Emerging Small Business Women-Owned Business Veteran Disabled
Comments ?		
* Required field		Exit Previous Next >

Addresses.

- 1. Primary Address: Enter your address where tax statements will be sent.
- 2. Remit To Address: If you prefer checks to be mailed to a different location, such as a local address.
- 3. Select NEXT to continue.

-					
Welcome	Identifying Information	Addresses	Contacts	Payment Information	Submit
Addresses - Step	9 3 of 6			Exit	revious Next
Primary Address					
* Country	USA Q United States			Permanant Add	
Address	1			Fermanent Audi	655
Address	3				
City	/]			
County	y	Postal			
State	Q				
Email II	D				
Other Addresses	D				
Check boxes below	to indicate addresses that are diffe	erent from your Primay A	ddress above:		
		Ontio	nal		
Remit To Address Address for remitting	ng payment Ad	dress for che	eck navment	S	
			oon paymon		
Invoice Address Address from which	n you send invoice				
				Exit	Previous Next >

Add Contact.

1. Select ADD CONTACT to set up a username and login for your account.

Note: Use at least one upper case, one lower case, and one number in your Username and Password. 2. Select OK to return to the Contacts page, select NEXT to continue.

Identifyin	Course and				ubmit
identityii	* First Name		T ~	Primary Contact	Next
6	* Last Name				INEXT
	Title				
	* Email ID				
contact infi	* Telephone			Ext	
	Fax Number				
	Contact Type		٢		
	Password Confirm Password				
l	Password Confirm Password Description				
l	Password Confirm Password Description Language Code				
	Password Confirm Password Description Language Code Time Zone				
l	Password Confirm Password Description Language Code Time Zone Currency Code	US Dollar)		
	Password Confirm Password Description Language Code Time Zone Currency Code	US Dollar	2		

Payment Preferences.

- 1. Request Payment Terms: In order to ensure timely payment, select "00" Payment Terms.
- 2. Remit Address: If you entered an alternate Remit address, ensure it is selected here.
- 3. Enter Address: Enter your email address to receive notification of payment.
- 4. Payment Method: Select "Automated Clearing House" if you want to be paid by electronic direct deposit.

ment Preferences ②	
Requested Payment Terms	00 Q 00
Invoice Address	PriAdd 🗢 🔚
Remit Address	PriAdd 🗘 🔚
	Withholding Required
	Enable Email Payment Advice
Email Address	Enter email for payment notification
Payment Method	Automated Clearing House

Banking Information and Address.

1. For Automated Clearing House (ACH) Direct Deposit Payments: enter only the information highlighted in the blocks below.

- 2. Bank ID Qualifier = 001
- 3. Bank ID = Routing Number
- 4. Branch ID is optional

er Banking Informatio	n 🕐					
Country	0					
Bank Name	~					
Branch Name						
Bank ID Qualifier	Q			Account Type		0
Bank ID						
Branch ID						
Bank Account Number				Check Digit		
DFI Qualifier	Q			DFI ID		
IBAN						
Bailt Addre	* Country Address 1	٩			1	
	Address 2					
	Address 3					
	City					
	County		Postal			
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Bank Phone	e					
	Prefix					
	Phone]				
	Ext					

Skip these sections

1. Select NEXT to continue.

Standard Industry (Codes 👔			
US - NAICS Codes		Description		
Add SIC Code				Î
Additional ID Numb	iers 🕐			
Туре	SetID	ID Number		
Add ID Number				đ
Comments				
Comments				J.
5			Exit Previous	Next
Required Field				TION.

Submit.

- 1. Enter your email for follow-up communication
- 2. Accept the Terms of Agreement.

Submit - Step 6 of 6	Exit	Previous	Next	•
Click the "Review" button to review the registration information.				
Click the "Submit" button to submit your registration after reviewing and accepting following Terms of Agreement .				
Email communication regarding this registration will be sent to:				
Terms and Conditions ?				
Make sure you read terms of agreement fully before submitting your registration.				
Click to accept the Terms of Agreement below.				
Terms of Agreement				
Review Submit				
	Exit	Previous	Next	•

Submit.

1. Select Submit and your registration will be reviewed and approved by Accounts Payable. Note: For questions or assistance, please send an email to AP@slac.stanford.edu.

Submit - Step 6 of 6	LAR	1101003	INGYL	7
Click the "Review" button to review the registration information.				
Click the "Submit" button to submit your registration after reviewing and accepting following Terms of Agreement .				
Email communication regarding this registration will be sent to: test@test.edu				
Terms and Conditions ②				
Make sure you read terms of agreement fully before submitting your registration.				
Click to accept the Terms of Agreement below. Terms of Agreement				
Review Submit				
	Exit	Previous	Next	•