



**GOPHER NEWS**  
C O M P A N Y

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## NEW VENDOR APPLICATION

Date \_\_\_\_\_

### Supplier

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
Email Address \_\_\_\_\_

### Payments/Affidavits

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
Email Address \_\_\_\_\_

### Returns

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
Email Address \_\_\_\_\_

### Supplier Number

*to be completed by GNC personnel*