



Vendor Profile and Classification Form

Vendor Profile

Vendor Name: _____

DBA: _____

Federal Tax ID #: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____

Contact Name: _____

Email: _____

- Type of Business:
- Individual/Sole Proprietor
 - Corporation
 - Partnership
 - Other

Vendor Classification

- Business Size:
- Small Business (As Defined by SBA)
 - Large Business

Small Business Categories (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Women-Owned Business Enterprise | <input type="checkbox"/> HUBZone Small Business |
| <input type="checkbox"/> Minority Business Enterprise | <input type="checkbox"/> Veteran-Owned Enterprise |
| <input type="checkbox"/> LGBT-Owned Business Enterprise | <input type="checkbox"/> None of the Above |
| <input type="checkbox"/> Service-Disabled Veteran Enterprise | <input type="checkbox"/> Other |

Note: Please attach a copy of certification if your company is certified by the following organizations: Small Business Administration, National Minority Suppliers Development Council (NMSDC), Women’s Business Enterprise National Council (WBENC) or National Gay & Lesbian Chamber of Commerce (NGLCC) Department of General Services (Veteran Business Only).

Is your business minority owned?

- | | |
|--|--|
| <input type="checkbox"/> Black / African American | <input type="checkbox"/> Pacific Asian |
| <input type="checkbox"/> American Indian / Alaska Native | <input type="checkbox"/> Indian Asian |
| <input type="checkbox"/> Hispanic / Latino | <input type="checkbox"/> 2 or more Races |
| <input type="checkbox"/> Nat. Hawaiian / Other | <input type="checkbox"/> Pacific Islanders |

If you are not a Women-Owned Business Enterprise or a Minority Business Enterprise or an LGBT-Owned Business Enterprise, do you have a diversity policy?

Yes, what percent and dollar value of your business goes to qualifying businesses? _____%
\$_____ Are figures actual or estimates?

No.

Completed By:

Name: _____ Signature: _____

Title: _____ Date: _____

Please return form to Accounts Payable, Armstrong Teasdale LLP, 7700 Forsyth Blvd., Suite 1800, St. Louis, MO 63105 or email to accountspayable@armstrongteasdale.com.

Armstrong Teasdale prohibits unlawful discrimination based on race, religion, color, national origin, sex, pregnancy, sexual orientation, gender identity, age, physical or mental disability, genetic information, veteran status, or any other protected classification. It is also expected that suppliers similarly have a non-discrimination policy within their organization or place of business.