ANCHORAGE SCHOOL DISTRICT
Purchasing Department
4919 Van Buren Street
Anchorage, AK 99517
fax: (907) 248-5704
purchasing@asdk12.org

REQUEST TO BE PLACED ON BIDDERS LIST

Check One: ☐ **Initial Applicatoin** ☐ **Revision of Existing Application**

Name of Company

Address Line 1:

Address Line 2:

City: **State:** **Zip Code:** ___ – ____

Alaska Business License:

Federal Tax ID Number: __ – _____ **or SSN:** ___ – __ – ____

Contact Person:

e-mail address:

Phone Number: (___) ___ – ____ EXT: ____

Alternate Phone Number: (___) ___ – ____ EXT: ____

Fax Number: (___) ___ – ____

Alternate Fax Number: (___) ___ – ____

Description of Goods/Services

Offered Additional Comments: