

CenterPoint Energy
UPDATE VENDOR MASTER

Procedure

A detailed procedure for completing this form is located at www.mycenterpointenergy.com/accounts payable/procedures/ under AP General Tips.

Required information for vendor creation

Before you complete a vendor creation request, you must acquire the following information from the vendor:

- The vendor's W-9
Substitute: You may complete the W-9 on page 4 in lieu of the vendor providing one.
- The vendor's legal name (from W-9)
- The vendor's tax identification number (from W-9)
- The vendor's physical address
- The vendor's telephone number
- The vendor's fax or email address for receiving payment notifications
- The name and telephone of the vendor's financial contact (e.g., treasurer, A/R manager)
- The vendor's banking information:
 - Bank name
 - Country
 - Routing number
 - Account number
 - Account holder

D&B DUNS number

Page 2 of this form requests a Dun and Bradstreet (D&B) DUNS number to expedite the vendor validation process. The Vendor Master Administrator verifies that each company has a DUNS number prior to creating the vendor. Providing the DUNS number up front decreases the turnaround time for maintenance.

Banking information

- All new vendors must provide banking information to allow for electronic payment. If a vendor requires payment by check, contact the Vendor Master hotline at (713) 207-7870 prior to requesting vendor creation.
- ACH is the preferred payment method. To have a vendor paid by wire, you must provide a specific business need in the Additional Notes at the bottom of page 2.

Vendor signature

When requesting vendor creation, a signature from the vendor and the other information at the bottom of the W-9 on page 4 are required when:

- The vendor is completing the form
- The vendor is subject to backup withholding (see Certification Instructions on page 4)

Before you begin

Before you complete this form, you must have:

- For changes to a vendor:
 - The SAP vendor number
 - The SAP vendor name
- For creation of a new vendor:
 - Identified that the vendor does not already exist in SAP
Reference: See **Searching for a Vendor** at www.mycenterpointenergy.com/accounts payable/procedures/ under AP General Tips.
 - An electronic copy of the vendor's W-9 for attaching to the request, or the W-9 information to complete on page 4.

Reactivating a vendor

To request the reactivation of a vendor flagged for deletion or blocked from posting, you must complete the form and provide the W-9 documentation as if you were requesting vendor creation.

CenterPoint Energy UPDATE VENDOR MASTER

CREATE
 CHANGE
 DELETE

To acquire a New Vendor Request for the headquarters location, complete an additional form for each branch. Email completed form to Vendor_Master3@CenterPointEnergy.com. For questions, contact the Vendor Master hotline at (713) 207-7870.

BOLD denotes a required field for a new vendor request. **Bold** denotes a field required for any non-PO vendor maintenance.

THIS TOP SECTION FOR CENTERPOINT ENERGY USE ONLY			
IF CHANGE/DELETE/REACTIVATE, CURRENT VENDOR NUMBER	*VENDOR NAME* (from W-9)	OLD VENDOR NAME (for name change)	
REQUESTED BY John C. Lallier	VENDOR DBA	CONFLICT OF INTEREST AGREEMENT (please check) <input type="checkbox"/> I understand that any potential conflict of interest as set forth by the CenterPoint <i>Standards of Conduct/Business Ethics Policy</i> has been approved by my management and reviewed by the Chief Ethics and Compliance Officer.	
REQUESTOR PHONE (713) 207-4399	DATE 10-04-2019	MANAGER'S NAME (for non-PO vendors) Cheryl Bowman	
MANAGER'S SIGNATURE (or copy manager when emailing request to Vendor Master)			
COMPANY CODE 0003	PURCHASING ORGANIZATION Energy Efficiency	*INVOICE/APPR IN WORKFLOW?* <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES, PROVIDE SAP DOCUMENT NUMBER (17xxxxxxx)	
Company: Creating a new vendor in one of the following extends the vendor to the other eight: 0002, 0003, 0016, 0062, 0072, 0077, 0082			

PHYSICAL ADDRESS DATA		
PHYSICAL STREET ADDRESS	*CITY*	
REGION (State)	*POSTAL CODE*	*COUNTRY*

CONTROL DATA	
TAX IDENTIFICATION NUMBER (attach W-9 or complete page 4)	DUNS NUMBER (See <i>D&B DUNS</i> number on page 1 for more information)

VENDOR CONTACT INFORMATION			
TELEPHONE NUMBER (1)	EXT	*TELEPHONE NUMBER (2)	EXT
FINANCIAL CONTACT PERSON (e.g., Treasurer, A/R Manager)		*FAX OR EMAIL FOR PAYMENT NOTIFICATION*	
FINANCIAL CONTACT PHONE	EXT	FINANCIAL CONTACT EMAIL (for notifying vendor of data changes)	

PAYMENT METHOD
See <i>Banking information</i> on page 1 for more information.
<input type="checkbox"/> ELECTRONIC ACH (preferable) <input type="checkbox"/> WIRE

BANKING INFORMATION			
BANK COUNTRY	*ROUTING NUMBER*	*ACCOUNT NUMBER*	*ACCOUNT HOLDER NAME*
BANK NAME		*BANK CONTACT NAME*	*BANK CONTACT PHONE*

ADDITIONAL COMMENTS

PURCHASING INFORMATION

Complete this page only if you are a CenterPoint Energy Purchasing employee.

ACCOUNT GROUP		
<input type="checkbox"/> ZPUR (Domestic) <input type="checkbox"/> MNFR (Manufacturer) <input type="checkbox"/> ZFOR (Foreign)		

ORDERING ADDRESS (OA)		
STREET ADDRESS OR P.O. BOX		CITY
REGION (State)	POSTAL CODE	COUNTRY

REMIT-TO-ADDRESS (PI)		
STREET ADDRESS OR P.O. BOX		CITY
REGION (State)	POSTAL CODE	COUNTRY

MINORITY STATUS	
MINORITY INDICATOR	MINORITY CERTIFICATION DATE

PURCHASING DATA		
ORDER CURRENCY	TERMS OF PAYMENT	INCOTERMS
SALESPERSON	TELEPHONE	EMAIL

<input type="checkbox"/> GR-BASED INVOICE VERIFICATION	<input type="checkbox"/> AUTOMATIC EVALUATED OR SETTLEMENT DEL.
<input type="checkbox"/> AUTOMATIC EVALUATED GR SETTLEMENT RET.	<input type="checkbox"/> ACKNOWLEDGEMENT REQUIRED
Attach Automated Invoice Submittal Agreement as applicable.	

If you are requesting a new vendor, complete this W-9 or attach a W-9 to your request. Detailed instructions are available at www.irs.gov.

Substitute for IRS form <b style="font-size: 24pt;">W-9	<b style="font-size: 18pt;">CenterPoint Energy <b style="font-size: 18pt;">Request for Taxpayer <b style="font-size: 18pt;">Identification Number and Certification		<b style="font-size: 12pt;">Give form to the requester. Do not send to the IRS.					
Name (as shown on your income tax return)								
Business name, if different from above								
Check the appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Exempt payee <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) _____ <input type="checkbox"/> Other (see instructions)								
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)						
City, state, and ZIP code								
List account number(s) here (optional)								
Taxpayer Identification Number (TIN)								
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part L instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Social security number</td> </tr> <tr> <td style="text-align: center;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> </tr> </table> </td> </tr> </table>		Social security number	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> </tr> </table>			
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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose Employer identification number to enter.		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Employer identification number</td> </tr> <tr> <td style="text-align: center;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> </tr> </table> </td> </tr> </table>		Employer identification number	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> <td style="width:33%; border: 1px solid black; height: 20px;"></td> </tr> </table>			
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CERTIFICATION INSTRUCTIONS - You must cross out item 2 below if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting of interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, the acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement account (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.								
SECTION II - CERTIFICATION Under penalties of perjury, I certify that:								
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and								
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and								
3. I am a U.S. person (including a U.S. resident alien).								
The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.								
Signature of U.S. person			Date					
Name	Title	Telephone number	Fax number					