Supplier Request for Information form

1. If you have never performed a business activity for Marquette University and have been approved as a new supplier or if you are an existing supplier that has not completed a Coupa Profile, you will receive an email from the “Coupa Supplier Portal” with the subject line “Request for Information from Marquette University”.

Hello Supplier,
Marquette University is excited to invite you to participate in our new procure to pay system provided by Coupa and branded MARQetplace! In order to transact business efficiently, MU requests that you complete the two-step process outlined below. Once registered, you can do things with Marquette University (and your other buying organizations that use Coupa) like view purchase orders, create invoices, manage POs and invoices, get real-time SMS alerts, and much more.

NOTE: DO NOT FORWARD THIS EMAIL - if you are not the correct account administrator for Marquette University please send the correct contact information including an email address to supplierinfo@marquette.edu and Marquette will resend the invitation.

STEP 1: Click on the "Join and Respond" button below, create your account and connect with Marquette on the Coupa Supplier Portal.

STEP 2: Complete your "Profile" by filling in the required fields in the form that appears after registering with the Coupa Supplier Portal.

Hint: Completing the "Remit" to section up front significantly reduces future invoicing issues. If payment via check is preferred leave the banking information section blank.

Please follow this link for detailed instructions on how to best set up your account: Supplier CSP Instructions

If you have any questions, please email supplierinfo@marquette.edu

Welcome!
Marquette University

Join and Respond
2. Click on the “Join and Respond” button, shown above, and create a record in the Coupa Supplier Portal. Fill out the following fields: First name, Last name, Company, email, password, and password confirmation. Accept the privacy policy and click “Submit”. Reminder: Do not forward the invitation.
3. Enter the necessary fields, note that fields with an * are required.

Supplier Information

* Name: INDIVIDUAL INSTRUCTIC
Doing Business As Name: Enter DBA name here
* Organization Type: Individual
* Country of Operation: United States

4. The Primary Contact section will be auto populated. You can edit if necessary

Primary Contact

* First Name: GOLDEN
* Last Name: EAGLE
* Email address: MARKETPLACE@OUTLC
* Work Phone: US/Canada: +1 (414) 288-7359, 650-555-1212
Mobile Phone: US/Canada: 650-555-1212
5. Complete the Primary Address fields. The following fields are necessary to complete the process: “Street address”, “Postal Code”, “City”, “State Region”, and “Country”. Please enter address or PO Box in the Street Address field. Foreign entities are required to fill in the State Region field. If not applicable, enter your city name.

6. Select either “United States” or “International” based on where you or your business is located. If United States is selected a “Federal Tax ID or SSN field appears. If International is selected a non-required International Tax ID field appears.

---

**Primary Address**

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Leave Blank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address Name</td>
<td>Leave Blank</td>
</tr>
<tr>
<td>PO Box</td>
<td>Leave Blank</td>
</tr>
<tr>
<td>PO Box Postal Code</td>
<td>Leave Blank</td>
</tr>
<tr>
<td><strong>Street Address</strong></td>
<td>1250 W WISCONSIN AVE</td>
</tr>
<tr>
<td>Street Address 2</td>
<td>SUITE 15</td>
</tr>
<tr>
<td>Postal Code</td>
<td>53021</td>
</tr>
<tr>
<td>City</td>
<td>MILWAUKEE</td>
</tr>
<tr>
<td>State Region</td>
<td>WI</td>
</tr>
<tr>
<td>Country</td>
<td>United States</td>
</tr>
</tbody>
</table>

***Please enter address or PO Box in the Street Address field. Foreign entities are required to fill in the State Region field. If not applicable, enter your city name.***

---

**Tax And Certificate Information**

* Are you a US or an International based company?  
  - United States  
  - International

* Federal Tax ID or SSN  
  - Enter SSN or FEIN here

* Are you using your Social Security # as your tax identifier?  
  - Yes
  - No

Enter digits only  
Ex: FEIN: 291234567 or SSN: 123456789
7. If you entered a SSN as your Federal Tax ID number, select “Yes” to the “Are you using your Social Security # as your tax identifier” question. A set of 9 questions will need to be completed. If a FEIN was entered, the set of 9 questions will not appear and you can move on to the next step.

8. Attach a W-9 or W-8BEN and check the box if you are Federal Reportable. The W-9 or W-8BEN is required to be approved to Coupa.
9. Select how you would like to be paid by Marquette. Choose either Check or Direct Deposit (ACH). If selecting Direct Deposit (ACH) enter a Remit-to email address.

Banking & Remittance Information

* How would you like to be paid by Marquette?  
  - [ ] Check
  - [ ] Direct Deposit (ACH)

*** Enter your Remit-To email address below and complete the Remit-To section by clicking the “Add” button. The following fields are required: BENEFICIARY NAME, BANK NAME, BANK ACCOUNT NUMBER, & BANK ROUTING NUMBER. ***

Remit-To Email: GoldenEagle@mu.edu

10. Click on the “Add” button to create a Remit-to Address and to enter banking information. If selecting to be paid via check, select the “Add” button and leave the banking information blank.

Remit-To Address Lines

Add one or more Remit-To Addresses by either filling out a new Compliant Invoicing Form or choosing an Existing Remit-To Address.
11. Follow the prompts to add your Remit-to and banking information if necessary

Choose Remit-To Address

Choose a Remit-to Location below - Recommended

It's a few more fields, but provides compliance, verification, and re-usability. Otherwise, click 'Cancel' to add info to your customer's form manually.

Create new Compliant Remit-To Address

Click Create New
Where's your business located?

Setting up your business details in Coupa will help you meet your customer’s invoicing and payment requirements. For best results with current and future customers, complete as much information as possible.

Legal Entity Name

Country

This is the official name of your business that is registered with the local government and the country where it is located.

Cancel  Continue
Complete the form and click on the “Done” button when finished. Enter the Beneficiary Name, Bank Name, Bank Account Number, and Bank Routing Number to complete the banking information section. The rest of the fields are not required. You can leave all other fields blank and scroll to the bottom of the screen to select “Done”
12. If appropriate Indicate if you are a Small Business, Minority Business, or Women Business Enterprise. If none of the above leave blank.

13. You must select and agree to at least one set of Terms & Conditions. Fellowship or Stipend should NOT be selected for speaker agreements, please select standard services.

14. You will receive a confirmation email once the form is approved by Marquette University.