### **QUICK REFERENCE GUIDE**

Updated April 6, 2020

### Do I Register as a Bidder or Supplier?

Using the correct registration process is important to conducting business with the State of Minnesota. Choosing the incorrect option may delay the processing of your registration and result in missing out on a bidding opportunity or delaying of a payment and purchasing transactions.

- Register as a Supplier Use this option to register with the State of Minnesota if you have been in contact with someone in the State and will be receiving a payment. Or, if you have been asked to register to receive a contract or purchase order from the State. The Supplier registration process collects the needed information for issuance of payments and purchasing documents. This process typically requires two days for review and activation of your account. Questions on registering as a Supplier can be emailed to the MMB Supplier Help Line at efthelpline.mmb@state.mn.us
- Register as a Bidder Use this option to register with the State of Minnesota if you are interested in quickly bidding on a solicitation event available on the Supplier Portal. Registering as a bidder requires minimal information to be entered and does not require State review before allowing you to submit a bid. Registering as a bidder will allow you to select commodities or services (categories) you have an interest in providing to the State of Minnesota and you will receive email notifications when the selected categories are available for bidding. Note: if your company has been selected for an award, you will receive an email notification asking you to register as a Supplier. You will need to provide additional information, subject to verification by the State of Minnesota, to fully register your Bidder ID as a Supplier ID before you will be issued a purchase order or contract. This process typically takes two days for review and account activation before the purchase order or contract can be processed.

Questions on registering as a Bidder can be emailed to the Office of State Procurement at <u>osphelp.line@state.mn.us</u>.

### **Register as Supplier**

Suppliers can self-register with the State by submitting a request on the Supplier Portal.

To submit a new supplier request in SWIFT, complete the following seven-step process.

#### Steps to complete

- Step 1: Open the Supplier Portal and enter Entity and TIN Type.
- Step 2: Enter Identifying Information.
- Step 3: Enter Address Information.

- Step 4: Enter Contacts.
- Step 5: Enter Payment Information.
- Step 6: Enter Category Codes.
- Step 7: Submit for Approval.

#### Step 1: Open the Supplier Portal and enter Entity and TIN Type.

Access the Supplier Portal from the following link: http://mn.gov/supplier

1. Select the **Register for an Account** Tile to begin registration.



2. Press the **Register as a Supplier** button.



- 3. On the *Welcome* screen (*Step 1 of 7*), select the **Start a new registration form** radio button to start the registration process for the supplier.
- 4. In the *Entity Type* and *TIN Type* fields, select the type of legal entity and Tax Identification Number for the supplier.
- 5. Press the **Next** button.



**Note**: If you already started the supplier registration request, select the **Continue from where you left** radio button, and enter the *Registration ID* to continue from where you last left off.

O Start a new registration form Continue from where you left
Continue from where you left
Registration ID
Forgot your registration ID?

### Step 2: Enter Identifying Information.

1. The *Identifying Information* screen will display (*Step 2 of 7*). Enter the supplier's information in the following fields. Required fields are marked with an asterisk (\*).

Field	Field Description				
* Tax Identification Number	Enter the Tax Identification Number, such as the Federal Employer Identification Number (FEIN) or Social Security Number (SSN). Do not enter the TIN with dashes, slashes, or spaces.				
	TINs are not required for foreign, one-time claim, or refund suppliers. If you enter a new supplier with the same TIN as an existing one, SWIFT will not allow you to continue registration.				
* Confirm Tax Identification Number	Reenter the tax identification number.				
Minnesota Tax ID	Enter the Minnesota Tax Identification Number to identify suppliers that pay the Minnesota Sales Tax				
* Legal Name	Enter the legal name.				
Additional Name	Enter an additional name for the supplier.				
http://URL	Enter the supplier's website.				
* Type of Contractor	Enter the type of contractor for the supplier—broker, construction, consultant, etc. ( <i>Hint</i> : Select the Look Up glass to view the options.)				
What were your company's	Enter the range of annual sales for last year.				
approximate annual sales for last year?	(Hint: Select the Look Up glass to view the options.)				
* Number of Employees.	Enter the range for the number of employees $-1 - 39$ or 40 or more.				
	(Hint: Select the Look Up glass to view the options.)				
* Has there been an ownership change within the past two years?	From the drop-down list, select Yes or No. <b>Note</b> : If you select Yes, make sure to also fill out the Vendor Name Change Request form online (https://mn.gov/mmb/assets/vendor-name- change-request-form_tcm1059-227279.pdf)				

2. Press the Next button.

	_						[		
	Welcome	Identifying Information	Addresses	Contacts	Payment	Information	Catego	orization	Submit
					Exit	Save for	Later	Previous	Next 🕨
Ident	ifying lr	nformation - Step 2 of 7							
		equired to provide their Federal Emploied in the state.	oyer Identification Number.	Your FEIN, (or TIN)	, will be used	I to confirm yo	our business	entity is not alread	y established as a
	ue ID & C	ompany Profile							
(?)		* Tax Identification Number							
		* Confirm Tax Identification Number				_			
		Minnesota Tax ID							
		* Legal Name							
		Additional Name							
		http://URL				Open URL			
Profil	e Questio	ans							
(2)	(					Q			
Ť	" Type of	Contractor				~			
						Q			
	annual sa	e your company's approximate les for last year?				~			
		of Employees, (Required for eporting Purposes)				۹			
		e has been an ownership ithin the past two years?		~					
		ase fill out a Vendor Name							

### **Step 3: Enter Address Information.**

1. The *Address* screen will display (*Step 3 of 7*). Enter the supplier's primary address information in the following fields.

Field	Field Description
* DBA Name 1	This field defaults with the supplier's Legal Name. However, if the supplier wants payments made to a "Doing Business As" (DBA) name, enter it here.
DBA Name 2	Enter an additional DBA name for the supplier, if applicable.
Country	This field will default with "USA."
(Change Country)	If registering a foreign supplier, click the <i>Change Country</i> link to select a foreign country. The <i>Address</i> fields will not display the country is selected.
* Address 1	Enter the supplier's primary physical address.
	A street address may be required for Minnesota-based businesses.
Address 2	Enter an additional address for the supplier, if applicable.
Address 3	Enter another additional address for the supplier, if applicable.
* City	Enter the city where the supplier resides.
* County	Enter the county where the supplier resides.
	Select "NON MINNESOTA" for out-of-state addresses.

Field	Field Description
	<b>Note</b> : You may need to enter the State before you enter the County.
* State	Enter the two-letter state abbreviation (e.g., MN for Minnesota). If needed, search for it using the <b>Look Up</b> icon.
* Postal	Enter the five- or nine-digit zip code (use format: XXXXX or XXXXX-XXXX).
* Email ID	Enter the supplier's email.

2. If the supplier has a Remittance and/or Invoice Address different from the Primary Address, check mark the **Remittance Address** box and/or the **Invoice Address** box, and enter address information in the fields below.

If both addresses are the same as the Primary Address, do not check mark these boxes.

3. Press the **Next** button.

Welco	me Ide	entifying Information	Addresses	Contacts	Payment Inf	formation	Categorization	Submit
					Exit	Save for L	ater • Previous	Next >
Addresse	s - Step 3 c	of 7						
Enter a 'Rem 'Invoice Addr	it To Address' i ess' is not rele	ur the physical address. if it is different. vant to this registration type y for each MN address.						
Primary Ad	dress							
3	DBA Name 1	TEST SUPPLIER 99						
	DBA Name 2							
	* Country	USA Q United States						
	Address 1							
	Address 2							
	Address 3							
	City							
	County		Postal					
	State	Q						
	*Email ID							
Other Addr	Other Addresses							
Oheck b								
	nce Address, If							
	for remitting pay	ment						
Address	Address from which you s	end invoice						

**Note**: When needed, SWIFT will automatically update the Address Lines to conform to USPS standards and abbreviations (e.g., it will change "STREET" to "ST"). When this occurs, a message box will display. Press **Yes** to continue.

The Primary Address Line 1 has been updated. (25000,328)								
The Primary Address Line 1 value has been changed from: 123 STREET								
to 123 ST to apply USPS standards.								
Press YES to accept the revised value or NO to leave the value as it was entered.								
Yes No								

### Step 4: Add Contacts.

1. The *Contacts* screen will display (*Step 4 of 7*). Press the **Add Contact** button.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
			(	Exit Save for I	Later Previous	Next >
Contacts - Step	4 of 7					
	ave at least one contact. You ca business might be: Executive M					
Company Contac	cts					
You have not	added any contact information to you	r application. Click "Add	Contact" button to add nev	v contact information.		
Add Contac	t					

2. The *Add Contacts* screen will display. Enter information about the contact for the supplier.

Field	Field Description
* First Name	Enter the first name of the contact.
* Last Name	Enter the last name of the contact.
Title	Enter the job title of the contact.
* Email ID	Enter the contact's email address.
* Telephone & Ext	Enter the contact's telephone number and extension, if applicable.
Fax Number	Enter the contact's fax number.
Contact Type	From the drop-down list, select the type of contact that's most applicable.
Primary Contact	Check mark this box if the contact is the primary one for the supplier.

3. Press OK.

	act Information	 
?	* First Name	Primary Contac
	* Last Name	
	Title	
	* Email ID	
	* Telephone	Ext
	Fax Number	]
	Contact Type	

4. The contact will now be added to the *Contact* screen under the *Company Contacts* section. Press the **Add Contact** to add another contact. If finished, press the **Next** button.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
Contacts - Step	4 of 7			Exit Save for	Later Previous	Next >
Primary	Name		Phone	De	signate Address	
۲	SUPPLIER CONTACT		123/456-789	90	Primary Address	â
Add Contact	t					

#### **Step 5: Enter Payment Information.**

- 1. The *Payment Information* screen will display (*Step 5 of 7*). To receive payments via electronic funds transfer, check mark the box that says, **Click here to enter EFT/Bank Information**.
- 2. To receive Payment Notifications via email, enter email information in *Payment Preferences*.
- 3. Enter banking information in *Supplier Banking Information*.
- 4. Press the **Next** button.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
			ĺ	Exit Save for I	ater Previous	Next 🕨
Payment Inform	ation - Step 5 of 7					
If you prefer payment by	y check, select 'Next'. ayment via EFT, please provide	usur basking isformati				
	d of EFT payments, check 'enal			mail address.		
Click here to enter E	FT/Bank Information					
Payment Preference	ces					
0						
	Enable En	ail Payment Advice			_	
	Email Address					
	The State of Minnesota will send payment details in a PDF docume	Payment Notifications to the In the payment notification	email address provided her	e. The State will also attach		
-		17			_	
Supplier Banking I	nformation					
	ank Name					
*Acc	ount Type	~				
*Bank Routin	g Number					
*Bank Account	nt Number					
*Re-enter Bank	k Account Number					
в	ank Address					
	Address 1	United Star	tes			
	Address 2					
	Address 3					
	City					
	County		Q Postal		]	
	State	Q				
в	ank Phone					
	Prefix					
	Phone					
	Ext					
	Fax				1	

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### Step 6: Enter Category Codes.

- 1. The *Categorization* screen will display (*Step 6 of 7*). This screen is optional to receive email notifications about future bidding opportunities from the State. In the *Description* field, enter a description of what goods/services the supplier offers, and press the **Search** button.
- 2. A list of UNSPSC Codes will display. Check mark all category codes that apply.
- 3. Press the Add Selected button. The category code will be added to Your Codes.
- 4. Press the **Next** button.

		_					
Welcome	e Ident	ifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
	i <b>on</b> - Step 6 your company		d of future bidding oppo	ortunities from the Stat And/Or	Exit Save for L e you may select categories fo		Next >
Desoription	food			<b>~</b>			]
Category							
Search	h						
UNSPISC C	odes (Searc	h results)					
				1-37 of 3	View Al		
	Selected Flag	Category	Descript	tion			
1		10121600	Bird and	fawl food		^	
2		10121700	Fish food	1			
3		10121800	Dog and	cat food			
4		10121900	Rodent f	bod			
5		10122000	Reptie f	bod			
6		10122100	Miscellar	neous animal food			
7		11141700	Food and	d tobacco waste and scra	P		
8		12170000	Colorant	5			
9		23181500	Food pre	paration machinery			
10		23181600	Food cut	ting machinery			
11		23181700	Food co	oking and smoking machi	nery		
12		24121800	Packagir	ng cans			
13		47131800	Cleaning	and disinfecting solution	5		
14		48101500	Cooking	and warming equipment			
15		48101600	Food pre	paration equipment			
Add Sel		Select All				•	
				4 1-1 of 1 💟			
Catego	ny .	Descriptio	n				
1 4810160	00	Food prep	aration equipment		0		



### Step 7: Submit for approval.

5. The *Submit* screen will display (*Step 7 of 7*). Press the **Review** button to review supplier information before submitting it for approval.

Welcome	Identifying Information	Addresses	Contacts	Payment Informatio	n Categorization	Submit
			ſ	Exit Save	for Later	Next >
Submit - Step 7 o	of 7					
Click the "Review" button	to review the registration information	l.				
Click the "Submit" button f	to submit your registration after revie	wing and accepting follow	ring Terms of Agreement			
	arding this registration will be sent to					
Please provide password *Password	for re-access in case we should nee	Pass Pass Must	word Requirements word length should b	s e a minimum of 8 chara al character (Example -		
Terms and Condition	ons					
Make sure you r	ead terms of agreement fully before	submitting your registration	on.			
Click to accept th	e Terms of Agreement below.					
Terms of Agreement						
Review	Submit					

6. The *Review Page* window will display. Select the **Edit** icons to change any of the information entered for the Supplier, and then press the **Return** button when finished.

		Review Page		
Contact Information				
* Primar	y Contact			Ľ
Des	cription	Primary Contacts		
Cor	ntact Name			
Co	ontact Type			
	Email ID			
	User ID			
	Description			
Lang	uage Code			
	Time Zone			
Curr	rency Code			
Phone Information				
Туре	Prefix	Telephone	Ext	
Business Phone				
Return				

7. Select the Terms of Agreement link to open the Terms of Agreement.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
			(	Exit Save for	Later Previous	Next >
Submit - Step 7	of 7					
Click the "Review" button	n to review the registration information	l.				
Click the "Submit" buttor	to submit your registration after revie	wing and accepting follo	wing Terms of Agreement			
	garding this registration will be sent to					
*Password	d for re-access in case we should nee	Pas Pas Mus	sword Requirements sword length should b	s e a minimum of 8 characte al character (Example - Per		
Terms and Condit	tions					
Make sure you	read terms of agreement fully before	submitting your registrat	ion.			
Click to accept t	he Terms of Agreement below.					
Terms of Agreemen	nt.					
Review	Submit					

8. Press the **Return** button when finished reading the *Terms of Agreement*.

Note that Pursuant to Minnesota Statute 270C.65, Subdivision 3, vendors are required to pro Employer Identification Number or Social Security Number. This information may be used in and state tax laws. Supplying these numbers could result in action to require a vendor to file delinquent tax liabilities. These numbers will be available to federal and state tax authorities involved in the payment of state obligations.	the enforcement of federal tax returns and pay
PRIVACY ACT NOTICE Internal Revenue code Section 6109 requires you to furnish your correct taxpayer identificati must file information returns with IRS. IRS uses the numbers for identification purposes and of your tax return. Payers must generally withhold 28% of taxable interest and certain other does not furnish a TIN to a payer.	to help verify the accuracy
Under penalty of perjury, I certify the number submitted with this form is my correct taxpayer	identification number.

- 9. Enter the supplier's email in the *Email communication* field.
- 10. Enter a password in the *Password* field.
- 11. Check mark the **Terms and Conditions** box.
- 12. Press the Submit button.

**Note**: The **Submit** button will not be available until the **Terms and Conditions** box is check marked.

Welcome	Identifying Information	Addresses	Contacts	Payment Information	Categorization	Submit
				Exit Save for	Later	Next >
Submit - Step 7	of 7					
Click the "Review" button	to review the registration information	L.				
Click the "Submit" button	to submit your registration after revie	wing and accepting follo	wing Terms of Agreement .			
Email communication reg	arding this registration will be sent to	:				
Please provide password	I for re-access in case we should nee	Pas Pas Mus	sword Requirements sword length should be	e a minimum of 8 characte I character (Example - Per		
Terms and Conditi	ons					
	read terms of agreement fully before ne Terms of Agreement below.	submitting your registrat	ion.			
Review	Submit					

13. The *Registration Submit Details* screen will display to confirm you submitted a supplier registration request in SWIFT. Make sure the *Registration ID* appears below.

Registration Submit Details				
Submitted				
<b>V</b>	You have successfully submitted your registration.			
	Your registration ID:			
	0001011519			

**Note**: The supplier will receive email notification providing confirmation of the submitted supplier registration request as well as the *Registration ID*.

Your Registration Form Has Been Submitted							
Details							
Your supplier registration form has been submitted for approval.							
Registration ID: 0001011519							
If you have any further questions regarding your registration process, please contact MN Management & Budget at (651) 201-8106, or email <u>efthelpline@state.mn.us</u> , or <u>vendor.mmbefax@state.mn.us</u> - fax: 651-797-1306.							
This message was automatically generated by the Minnesota State Wide Integrated Financial Tools (SWIFT) system on 2019-01-30 at 11.49.41.000000. Please do not reply to this email.							
Thank you							
State of Minnesota							

- 14. Wait up to three days for the approval process to be completed.
- 15. For questions about the approval process, please contact the Supplier Support Unit (<u>vendor.mmbefax@state.mn.us</u>), using the *Registration ID* as a reference.