



SUPPLIER PROFILE SHEET
Micro Purchase
Website Hosting & Domain Manager Acquisition
Community Development Block Grant – Disaster Recovery
Foundation for Puerto Rico
2021-MP-12

To: Foundation for Puerto Rico
Kevin.perez@foundationpr.org/veronica.montalvo@foundationpr.org

Supplier Data

(1) Supplier’s Legal Name: _____

(2) Supplier’s Tax ID: _____

(3) Supplier’s DUNS No.: _____

(4) Supplier’s Physical Address: _____
(Street Address Line 1)

(Street Address Line 2)

(City) (State) (Zip)

(5) Supplier’s Postal Address: _____
(Street Address Line 1)

(Street Address Line 2)

(City) (State) (Zip)

(6) Supplier’s Phone Number: _____

(7) Supplier’s Facsimile Number: _____

(8) Supplier’s Email Address: _____

(9) Supplier’s Authorized Representative: _____

(Authorized Representative Name) _____
(Authorized Representative Position)

The Supplier hereby certifies that the above information is accurate:

(Authorized Representative Signature) _____
(Date)

(Authorized Representative Name)