

Vendor Information Verification Request

Date: [Insert Date]

To: [Vendor Name]

[Vendor Address]

[City, State, Zip Code]

Dear [Vendor Contact Name],

We are in the process of verifying vendor information for payment processing. In order to ensure that your payments are processed accurately and promptly, we kindly request that you provide us with the following information:

- Company Name: [Insert Company Name]
- Tax ID Number: [Insert Tax ID]
- Address: [Insert Detailed Address]
- Contact Person: [Insert Contact Name]
- Phone Number: [Insert Phone Number]
- Email Address: [Insert Email Address]

Please complete the above information and return this request to us by [Insert Due Date]. If you have any questions, feel free to contact us at [Insert Contact Phone Number] or [Insert Contact Email].

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Address]

[City, State, Zip Code]