

From: Brenda Griffith <bgriffith@ashevillenc.gov>
Sent: 4/21/2021 2:18:09 PM
To: spolston@sunriseinasheville.org
Cc: Tawnya Vess <tvess@ashevillenc.gov>, Beatrice Abernathy <babernathy@ashevillenc.gov>
Subject: Fwd: Vendor Application - Sunrise Community for Recovery & Wellness
Attachments: [Sunrise_Community_for_Recovery__Wellness_1N2YPtZqFVWBSn.pdf](#)

Ms. Polston,

We have received your W-9 and vendor application. On your W-9, you list your company name as Sunrise Community for Recovery & Wellness, Inc, P. O. Box 845, Asheville, NC 28802 and on your vendor application, you list your company name as Sunrise Community for Recovery & Wellness, W-9 address-P O Box 845, Asheville, NC 28802.

In order to process your application the name and address of your company MUST be the same on your W-9 and vendor application. You can add a different address as a Remit address if you like.

Please send us an updated copy where the W-9 and vendor application match.

Thank you and have a great day.

----- Forwarded message -----

From: 'SeamlessDocs' via purchasing <purchasing@ashevillenc.gov>
Date: Wed, Apr 21, 2021 at 3:01 PM
Subject: Vendor Application - Sunrise Community for Recovery & Wellness
To: <Purchasing@ashevillenc.gov>



New Submission

A new submission was received for the form below. Log into your Submission Manager to review and process it.

Form name	Vendor Application
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Submission Details:

I am a(n):
New vendor

Company Name
Sunrise Community for Recovery & Wellness

DBA (Doing Business As)

W-9 Address

Street Address

50 S. French Broad Ave.

W-9 Address

Suite 242

City

Asheville

State

NC

Zip

28801

Email (used for PO delivery)

spolston@sunriseinasheville.org

Identification

FID

FID

20-5775122

1099 Information From W-9

YES

Enter NIGP Code(s) below:

952

General Contact Name

Sue Polston

Title / Department (General Contact)

Executive Director

General Contact

General Contact

8282051205

General Contact

spolston@sunriseinasheville.org

Accounts Payable Contact Name

Chantal Saunders

Title / Department (Accounts Payable Contact)

Bookkeeper

Accounts Payable Contact
Accounts Payable Contact
8282311731

Accounts Payable Contact
sunriserecoverybooks@gmail.com

Purchasing Contact Name
Jacqui

Title / Department (Purchasing Contact)
Operations Director

Purchasing Contact
Purchasing Contact
8289808677

Purchasing Contact
jderreberry@sunriseinasheville.org

Is the business a MWBE (Minority and women-owned business enterprise)?
No

Please upload W-9 Form
w9 Sunrise Community.pdf

Attachments:

[w9 Sunrise Community.pdf](#)

Log in to view submission â†‘

[Log in to view in Submission Manager](#)

City Of Asheville | P.O. Box 7148 Asheville, NC-28802 US

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Brenda Griffith
Senior Office Assistant
Finance Department
828-259-5709