

# University of Iowa –Supplier Change Request Instructions

Link to Online Application: [eSupplier Connection Supplier Portal](#)

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## Introduction:

Thank you for doing business with the University of Iowa. This script will help you submit a supplier change request (SCR) to maintain your supplier information. Please be sure to read all the **Welcome** instructions as well as the instructions included on each page (step) of the supplier change request process. Should you have any questions or comments, please email the Supplier Relations team at [purchasing-vendor@uiowa.edu](mailto:purchasing-vendor@uiowa.edu).

**NOTE: We** recommend that you use one of the following browsers: Google Chrome, Mozilla Firefox, Safari, and Microsoft Edge. **For security purposes while logged in, anytime you are not actively using the system for approximately 20 minutes you will timeout from the system. Any unsaved work will need to be entered again from the beginning.** To guard against this, we recommend that you save any changes once entered.

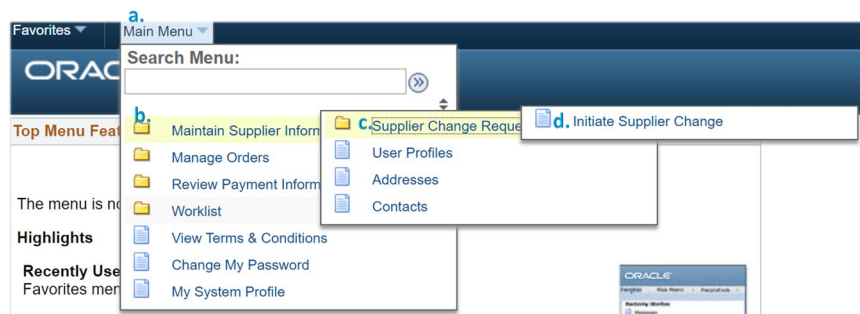
## Step 1 – Login



- a. Enter your **User ID** which begins with 'ES-'. **User ID** is case sensitive, be sure to use the same case from the email you received with your login credentials.

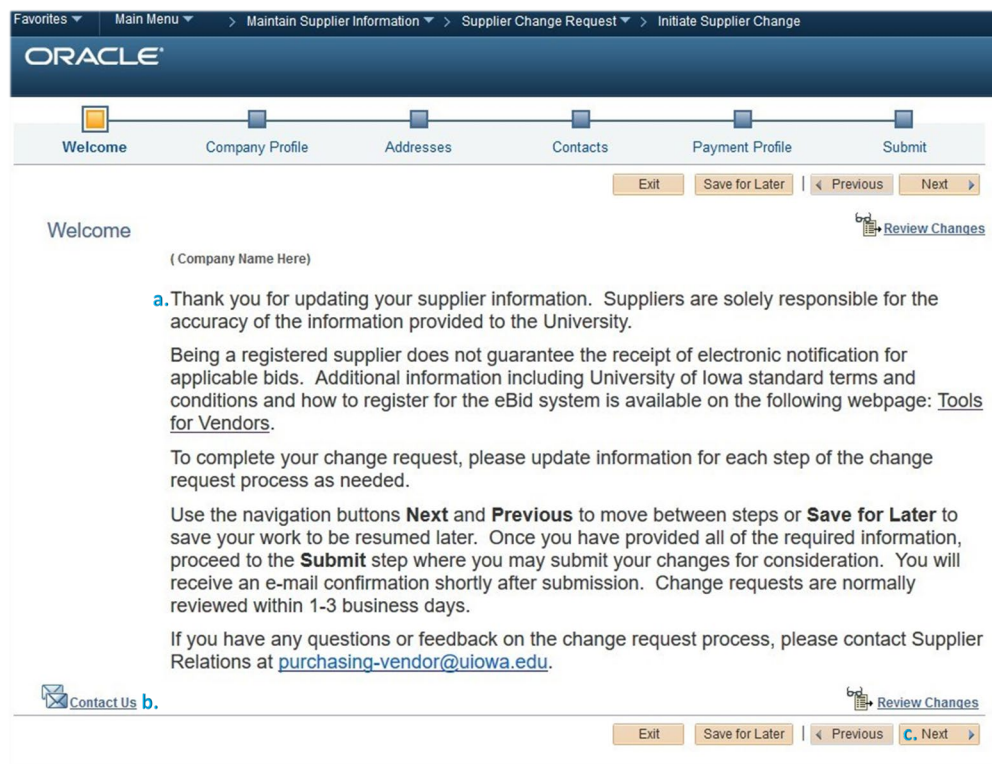
- b. Enter your **Password** which is case sensitive, be sure to use the same case you originally entered for your password. If it is the first time you are logging in, you will be asked to change your password and to set your forgotten password reminder.
- c. Select the **Sign In** button to continue to **Step 2**.

## Step 2 – Navigate



- a. Select the **Main Menu** at the top of the webpage on the top left of eSupplier Connection.
- b. Select the **Maintain Supplier Information** menu group.
- c. Select the **Supplier Change Request** menu group.
- d. Select the **Initiate Supplier Change** menu item and continue to **Step 3**.

## Step 3 – Welcome



- a. Read the **Welcome** message.
- b. If you have any questions, select the **Contact Us** link on the left side at the bottom of the page now or at any time while entering your supplier change request.
- c. Select the **Next** button to continue to **Step 4**.

## Step 4 – Company Profile

Company Profile for Company Name Here

[Review Changes](#)

**a.** [Please use this link to review your firms current setup prior to making changes to the Profile Questions -> Current Supplier Info](#)

The IRS requires that you provide information which will allow us to complete 1099 reporting. If a correct Taxpayer Identification Number and 1099 reporting address are not provided, payments may be subject to 31% withholding.

**Unique ID & Company Profile**

**b.** \*Legal Name

Legal Name Cont'd

Expand All Collapse All

**Profile Questions**

\*Is change related to a Taxpayer ID change? (use the select button to choose a response from the list)

NOTE: If Yes is selected, a new online supplier registration will be required for the new Taxpayer ID. The new online supplier registration can be submitted clicking on the Supplier Application link on the following webpage: [www.uiowa.edu/ap-purchasing/tools-vendors](http://www.uiowa.edu/ap-purchasing/tools-vendors)

If Don't Know is selected, contact the Supplier Relations Team at [purchasing-vendor@uiowa.edu](mailto:purchasing-vendor@uiowa.edu) or use the Contact Us link below.

**c.**

Attach additional documentation associated with change in Legal Name and/or Legal Name Cont'd. (select the Add/View Attachments button)

Attachments (0) **d.**

What is your Business Name/disregarded entity name or doing business as (DBA) name, if different from Legal Name above?

**e.**

A completed signed and dated W-9 (USA), W-8BEN-E (Foreign Company), W-8BEN (Non-Resident), W-8EXP (Foreign Government), or W-8ECI (Foreign Persons) is required to proceed with the registration. US Citizen/Resident Honorary recipients submit completed, signed W-9 and documentation of event.

Attachments (0) **f.**

Effective date (if applicable)

**g.**

How would you like to receive your purchase orders? (use the select button to choose a response from the list)

**h.**

Does your business accept Credit Cards without charging an additional processing/convenience fee?

**i.** ☐ Yes ☐ No

- a. Select the **Current Supplier Info** hyperlink to see the information currently recorded by the University for your firm. Only information that has changed needs to be entered into the **Profile Questions** section of the SCR.

**NOTE:** If you are adding information to a question that allows for multiple selections. Be sure to include all appropriate selections, even if they were already included on the **Current Supplier Info** page. The information you enter will replace the previous information entered, additional selections are not added to existing selections.

- b. Make any needed updates to the **Legal Name** of your firm or yourself (for an individual). Make sure the name matches what is indicated on your W-9. If the whole name does not fit, use **Legal Name Cont'd** for the remainder breaking at the last space between words in **Legal Name**. As a note, all words are case sensitive.
- c. Select **Yes** if the supplier change request being created is related to a taxpayer ID change. Select **Don't Know** if you are not sure. And, select **No** if the SCR is not related to a taxpayer ID change. NOTE: If you

answer **Yes**, you must submit a new online supplier registration for the new TIN. If you answer that you **Don't Know**, you will be asked to contact the Supplier Relations team at [purchasing-vendor@uiowa.edu](mailto:purchasing-vendor@uiowa.edu) for more information on next steps.

- d. If the **Legal Name** and **Legal Name Cont'd** have changes, please attach any available documentation associated with the name change.
- e. If your firm has a **Business Name/Disregarded Entity Name or Doing Business As (DBA) Name** that has changed or to be added (other than the **Legal Name**) please enter it here, otherwise leave blank.
- f. Attach a completed **W-9 (USA)**, **W-8BEN-E (Foreign Company)**, **W-8BEN (Non-Resident)**, **W-8EXP (Foreign Government)** or **W-8ECI (Foreign Persons)** for your firm by selecting the **Add Attachment** hyperlink, clicking **Upload** on the popup window, selecting the **Browse** button and highlighting the file name and clicking the **Open** button, then clicking the **Upload** button, entering an **Attachment Description** (optional), and finally selecting the **Return** button.
- g. If there is a specific **Effective Date** for the information included on the registration request enter it, otherwise leave blank. Note, on the Addresses and Contacts tabs, you will also need to specify the effective date for any changes unless they are valid once the SCR is approved.
- h. To update the default Purchase Order dispatch method, select from list of valid options of **Email** or **Fax**.
- i. To update if your firm accepts credit cards, select **Yes** or **No**.

Is your primary place of operations outside the United States of America

j. ☐ Yes  
☐ No

If yes, please include any payment information below as needed.

The University's wire transfer form can be found on the following webpage <https://uiowa.edu/ap-purchasing/department-forms>. The form can be accessed by selecting the Wire Transfer Form link at the bottom of the page.

Attachments (0) [k. Add/View Attachments](#)

Will the ENTIRE electronic payment(s) from The University of Iowa be transferred to a foreign bank account?

To comply with International ACH Transaction (IAT) rules, you must notify the University of Iowa if ACH-disbursed funds are being transferred from a United States financial institution to a financial institution in another country.

The particular rules are pursuant to requirements of the Office of Foreign Assets Control. In order for the University of Iowa to comply with the IAT rules and the applicable United States laws, you must answer the question above.

l. ☐ Yes  
☐ No

Type of Business (use the select button to choose a response from the list)

m [Select](#)

Services you provide (use the select button to choose a response from the list)

NOTE: For suppliers that manufacture and/or distribute products or equipment (including Medical/Dental devices and/or supplies), please choose option 13 "Do not provide these services..." from the list of possible responses.

n. [Select](#)

Type of Operation including Minority and/or Disadvantaged Owned Concern\* (use the select button to choose a response from the list)

\* Minority and/or disadvantaged owned concerns must be 51% or more owned and managed by minority and/or disadvantaged persons.

o. [Select](#)

If you selected Iowa Targeted Small Business from the previous list, please attach a copy of your certification by the Iowa Economic Development Authority (IEDA)/Iowa Department of Inspections & Appeals (DIA) as an Iowa Targeted Small Business.

Attachments (0) [p. Add/View Attachments](#)

- j. To update the selection indicating if your firm's principal place of operations is outside the USA, select either **Yes** or **No** as appropriate.

- k. If your firm's principal place of business has changed to be outside the USA, please attach **Payment Information** such as the University's wire transfer form. The form can be found on the following webpage <https://ap-purchasing.fo.uiowa.edu/departments-forms> by selecting the **Wire Transfer Form** link at the bottom of the page.
- l. To update if your firm will transfer **entire payments** received from the University to a foreign bank account, select **Yes** or **No** as appropriate.
- m. Update your firm's **Type of Business** by selecting from list of valid options. One or more options may be selected. If information is not available or the list of options is not applicable, it can be left blank. If any changes are made, please select all that apply even if they are already shown when selecting the hyperlink for Current Supplier Info (a.).
- n. To update the **Services you provide**, elect from list of valid options. One option must be selected.
- o. To update the **Type of Operation**, select from list of valid options. One or more options may be selected, otherwise leave blank. If any changes are made, please select all that apply even if they are already shown when selecting the hyperlink for Current Supplier Info in **a.** above.
- p. If your firm will now be identified as an Iowa Targeted Small Business, attach a copy of the certification by the IEDA/DIA by selecting the **Add Attachment** hyperlink, clicking **Upload** on the popup window, selecting the **Browse** button and highlighting the file name and clicking the **Open** button, then clicking the **Upload** button, entering an Attachment Description (optional), and finally selecting the **Return** button.

CONFLICT OF INTEREST POLICY (REQUIRED)

The Board of Regents and the Iowa Code policies govern business transactions involving conflict of interest situations and relationships between employees and suppliers. The University of Iowa has established procedures in accordance with the Board of Regents and Iowa Code policies on conflict of interest for individuals participating in purchasing decision making. Please see [www.uiowa.edu/ap-purchasing/col-purchasing](http://www.uiowa.edu/ap-purchasing/col-purchasing) for more information.

DEFINITIONS

Conflict of interest vendor / "employee" (state definition):

- \* A paid employee (whether full-time, part-time, hourly, temporary, or student - including a graduate student on assistantship) of a Regent institution or the Board of Regents Office
- \* A member of the Board of Regents, State of Iowa
- \* Any firm of which any of the above referred persons is a partner or sole proprietor
- \* An employee of another State of Iowa agency (Iowa Department of Transportation, Department of Administrative Services, Department of Human Services, etc.)
- \* Any State of Iowa officials, members of the general assembly, or legislative employees

Conflict of interest vendor / "employee" (federal definition):

- \* A paid employee (whether full-time, part-time, hourly, temporary, or student - including a graduate student on assistantship) of The University of Iowa
- \* An officer or agent of the University, any member of his or her immediate family, or his or her partner
- \* An organization which employs or is about to employ any of the parties indicated herein
- \* Anyone who has a financial or other interest in or a tangible personal benefit from a firm selected for an award and/or contract

Does any Officer, Director, Owner or Partner in this company have a relationship (as described in the DEFINITION above) with the University of Iowa or State of Iowa Regent Institution or any State of Iowa government department or agency? \*

☐ Yes

☒ No

If yes, please state the NAME and RELATIONSHIP to the individual who works at The University of Iowa (or other individual as described in the DEFINITION above).

Does any Officer, Director, Owner or Partner in this company hold a position at any State of Iowa Regent institution or any State of Iowa government department or agency? \*

☐ Yes

☒ No

If yes, please state the NAME and RELATIONSHIP to the individual who works at a State of Iowa Regent institution.

[Contact Us](#) [Current Supplier Info](#) [Review Changes](#)

[Exit](#) [Save for Later](#) [Previous](#) [Next](#)

- q. After reading the **Conflict of Interest Policy** in full, select **Yes** or **No** using the down arrow to identify if your firm's Officer, Director, Owner or Partner holds a position with any State of Iowa Regent institution and/or a State of Iowa government department or agency is a conflict of interest supplier. If **Yes** is selected, enter the **NAME and RELATIONSHIP of the individual(s)** with the defined conflict.

- r. Enter any additional **Comments**, including more information if line 8 for **Other** was selection from the options under **Type of Organization** (l) and/or if line 13 for **Do not provide these services** was selected from the options under **Services you provide** in n. above.
- s. Select the **Review Changes** hyperlink
- t. Select the **Exit** button to cancel the SCR without any changes.
- u. Select the **Save for Later** button to save the SCR to be completed later.
- v. Select the **Next** button to continue to **Step 5**.

## Step 5 – Addresses

- a. Select the **Edit** button to make changes to an existing address.
- b. Select the **Add New Address** button to enter a new address.
- c. Select the **Next** button to continue to **Step 6**.

- d. When the **Edit** button is selected in a. above, the **Description** can be updated by selecting the magnifying glass to see the list of valid selections which are used to identify if the address should be used for ordering only, remittances only, or both ordering and remittances.
- e. For firms based in the United States of America, the **Country** code will default to USA and is not updatable. Foreign-based firms can change the **Country** code by clicking on the magnifying glass and selecting from the list of valid **Country** codes.
- f. **Address line 1, City, County, State, and Postal** can all be changed and are all required. **Address lines 2, 3, and 4** can be updated and should be used if more space is needed than provided in **Address line 1**.

- g. **Email ID** is required on the default ordering address if **Email** was selected to receive your purchase orders (**Step 4, h.**).
- h. The **Phone Type** can be changed by selecting the field to see a list of valid values. The **Telephone** can also be updated if needed. A **Phone Type** of **FAX** must be included in the **Phone Information** for the default ordering address if **FAX** was selected to receive your purchase orders (**Step 4, h.**).
- i. Select the **Add Phone** button to add a new telephone number. A **Phone Type** of **FAX** must be included in the **Phone Information** for the default ordering address if **FAX** was selected to receive your purchase orders (**Step 4, h.**).
- j. The buttons next to **Approved Changes Take Effect** can be used to identify if changes should become effective when the supplier change request is approved or if the changes should be effective on some future date.
- k. Select the **OK** button once all changes have been made for the address.

Address Information for Company Name Here

Address Information

l. Description

m. Country

n. Address 1

Address 2

Address 3

Address 4:

City

County

State

Postal

Email ID

Phone Information

*Phone Type	Location	Prefix	Telephone	Extension
<input type="radio"/> Business Phone	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

p. Add Phone

q. Approved Changes Take Effect: ☒ Approval Date ☐ Future Date

r. OK Cancel

- l. When the **Add New Address** button is selected in **b.** above, the **Description** can be completed by selecting the magnifying glass to see the list of valid selections which are used to identify if the address should be used for ordering only, remittances only, or both ordering and remittances.
- m. For firms based in the United States of America, the **Country** code will default to USA and is not updatable. Foreign-based firms can select the appropriate **Country** code by clicking on the magnifying glass and selecting from the list of valid **Country** codes.
- n. **Address line 1, City, County, State, and Postal** are all required. **Address lines 2, 3, and 4** should be used if more space is needed than provided in **Address line 1**.
- o. The **Phone Information** section must include a **Phone Type** of **Business Phone** at a minimum. The list of valid **Phone Types** can be viewed by selecting the field to see a list of valid values.
- p. Select the **Add Phone** button to add a new telephone number and **Phone Type**.
- q. The buttons next to **Approved Changes Take Effect** can be used to identify if changes should become effective when the supplier change request is approved or if the changes should be effective on some future date.
- r. Select the **OK** button once all changes have been made for the address.

## Step 6 – Contacts

Contacts for Company Name Here

Select the Edit button to make changes to existing contacts. To add a new contact, select the Add New Contact button and a new window will open.

Name	Address	Address 1	City	Postal	Change Action	Change Effective Date	Edit
Becker Freeman	OrderRemit	1 Main St	Coralville	52241			

**b. Add New Contact**

**a.**

- Select the **Edit** button to make changes to an existing address.
- Select the **Add New Contact** button to enter a new contact at your firm.
- Select the **Next** button to continue to **Step 7**.

Contact Information for Becker Freeman

**Contact Information**

**d.** Description

**e.** Contact Name

Contact Title

\* Email ID

URLID

Contact Address

Contact Type

**Phone Information**

Phone Type	Prefix	Telephone	Extension	Remove
<b>f.</b> Business Phone		555/555-5555		<input type="checkbox"/>

**g.** Add Phone

**h.** Approved Changes Take Effect: ☒ Approval Date ☐ Future Date

**i.** OK Cancel

- When the **Edit** button is selected in **a.** above, the **Description** can be updated by selecting the magnifying glass to see the list of valid selections.
- The **Contact Name**, **Contact Title**, **Email ID**, **URLID** (your firm's web address), **Contact Address** and **Contract Type** can all be updated as appropriate. **Contact Name**, **Email ID**, **Contact Address**, and **Contact Type** are all required.
- The **Phone Information** section must include a **Phone Type** of **Business Phone** at a minimum. The list of valid **Phone Types** can be viewed by selecting the field to see a list of valid values.
- Select the **Add Phone** button to add a new telephone number and **Phone Type**.
- The buttons next to **Approved Changes Take Effect** can be used to identify if changes should become effective when the supplier change request is approved or if the changes should be effective on some future date.
- Select the **OK** button once all changes have been made for the address.

- j. When the **Add New Contact** button is selected in **b.** above, the **Description** can be completed by selecting the magnifying glass to see the list of valid selections.
- k. The **First Name**, **Last Name**, **Contact Title**, **Email Address**, **URL** (your firm's web address), **Contact Address** and **Contract Type** can all be entered. **First Name**, **Last Name**, **Email Address**, **Contact Address**, and **Contract Type** are all required.
- l. The **Phone Information** section must include a **Phone Type** of **Business Phone** at a minimum. The **Phone Type** can be changed by selecting the field to see a list of valid values.
- m. Select the **Add Phone** button to add a new telephone number and **Phone Type**.
- n. The buttons next to **Approved Changes Take Effect** can be used to identify if changes should become effective when the supplier change request is approved or if the changes should be effective on some future date.
- o. Select the **OK** button once all changes have been made for the address.

## Step 7 – Payment Profile

- a. Select the **Edit** button to make changes to the **001 - Primary** or **002 - ACH** location for your firm.
- b. Select the **Next** button to continue to **Step 8**.

Payment Profile

Payment Profile for 002 - ACH

Invoicing		Remitting	
Supplier	Company Name Here Order/Remit 1 Main St Coralville, IA 52241	Supplier	Company Name Here Order/Remit 1 Main St Coralville, IA 52241

Expand All Collapse All

**Payment Preferences**

d. Payment Terms ID: 2%15 2%15N30  
Payment Method: Automated Clearing House

**Payment Notification Preferences**

e. ☐ Enable Email Payment Advice  
Email ID:   
Payment Method: Automated Clearing House

**Bank Accounts**

Default	Beneficiary Bank	Routing Number	Branch Name	Bank Account #	Edit
<input checked="" type="checkbox"/>	Big Bank	273975098		XXXXXXXXXX9541	f.

Add Bank Account

g. OK Cancel

- Use the **Select a Different Address** hyperlinks to change either the Invoicing or Remitting address for the **001 - Primary** and **002 - ACH** location(s) for your firm when needed.
- The default **Payment Terms ID** for the **001 - Primary** and **002 - ACH** location(s) can be changed by selecting the magnifying glass to see a list of valid payment terms.
- On the **002 - ACH** location, **Payment Notification Preferences** can be set for ACH payments. The **Enable Email Payment Advice** checkbox should be checked on to receive an ACH payment notifications and when checked on an Email ID must also be entered. If the **Enable Email Payment Advice** checkbox is unchecked, no ACH payment notification will be sent.
- On the **002 - ACH** location, select the **Edit** button to make change to **Bank Account** information.
- Select the **OK** button once all changes have been made for the **Payment Profile**.

Supplier Bank Account

**Bank Accounts**

h. Description: Company Name Here

Country: USA United States

i. Bank Name: Big Bank

Branch Name:

Bank Account Number: 141005159641

Routing Number: 273975098

**Bank Address**

Country: USA United States

j. Address 1: 10 Bankers Alley

Address 2:

Address 3:

Address 4:

City: Iowa City

County:

State: IA Postal: 52240

**Bank Phone**

k. Prefix:

Phone:

Ext:

Fax:

l. OK Cancel

- The **Description** should be updated if there is a change in your firms **Legal Name**.
- The **Bank Name**, **Branch Name**, **Bank Account Number** for ACH payments, and the **Routing Number** for ACH payments can all be updated in the **Bank Accounts** section. The **Bank Name**, **Bank Account Number**, and **Routing Number** are all required.
- If updated, the **Address line 1**, **City**, **County**, **Postal** and **State** are all required. **Address lines 2, 3**, and **4** should be used if more space is needed than provided in **Address line 1**.
- The **Phone** can be entered or updated in the **Bank Phone** section. If entered, please use the following format: 999/999-9999.
- Select the **OK** button once all changes have been made for the **Supplier Bank Account**.

## Step 8 – Submit

The screenshot shows the Oracle Supplier Change Request interface. At the top, there is a breadcrumb trail: Favorites > Main Menu > Maintain Supplier Information > Supplier Change Request > Initiate Supplier Change. Below this is the Oracle logo and a navigation bar with tabs: Welcome, Company Profile, Addresses, Contacts, Payment Profile, and Submit (which is highlighted). Under the Submit tab, there are buttons: Exit, Save for Later, Previous, and Next. The main content area is titled 'Review and Submit Changes for Company Name Here'. It contains instructions: 'Please review our registration information for accuracy prior to submitting your change request. Use the "Review" button to review changed information. Use the "Submit" button to submit your change request.' Below this, it says 'Email communication regarding this request will be sent to:' followed by a text input field containing 'a. email@here.com'. Then, there is a section labeled 'b. Confirm Changes' with a checked checkbox. Below this are three buttons: 'c. Review' (highlighted), 'Withdraw', and 'd. Submit'. At the bottom left, there is a 'Contact Us' link with a mail icon. At the bottom right, there are buttons: Exit, Save for Later, Previous, and Next.

- a. Verify that the correct email address for any communications regarding this supplier change request is included in the **Email** field.
- b. To confirm all changes, select the **Confirm Changes** hyperlink.
- c. To review all changes, select the **Review** button.
- d. Select the **Submit** button to send the supplier change request to the University for final review and approval.