

<u>Setting Up a Supplier ID Number</u> <u>with Ohio Pays</u>

Independent Provider

You need access to your bank information (bank name, account & routing number).

Go to https://ohiopays.ohio.gov/



This document will guide you step by step to complete the Payee Registration process. If you require other assistance with OhioPays (such as requesting access to a Payee Profile you already established) you can access the OhioPays Help Documents here:

https://ohiopays.ohio.gov/helpful-resources/help-documents

REGISTER IN OHIOPAYS

How to Register

Companies, Individuals or Providers interested in doing business with the State of Ohio can register their business in the OhioPays Portal. As financial transactions occur, you can view information about the associated invoices, purchase orders, and payments for these transactions in the OhioPays Portal.



Before you begin registering, make sure you have:

- Tax ID Number (TIN), Social Security Number (SSN), or Employee Identification Number (EIN) and Name of the Business or Person.
- The primary address information provided must match the address on the banking record with your financial institution and W9. It must match to complete registration.
- Banking information (Bank Routing Number & Account Number).
- You may be required to attach a current voided check or a bank letter on bank letterhead confirming your banking account information.



REGISTER IN OHIOPAYS

	OH ID Ohio's Digital Identity. One State. One Account. Register once, use across many State of Ohio websites Create Account	
3. Enter your User ID, Password, and click Log in	Log In онір	
	Password Q	
	Log in Forgot OH ID? Forgot password? Get login help	

Use your OH ID username and password



REGISTER IN OHIOPAYS

 6. Select Yes or No to be the administrator for this Payee? () I Welcome Complete I dentifying Information Visited I dentifying Information Visited I Address and Contact Not Started I Payment Information Not Started I Payment Information Not Started I Payment Information Not Started I Review W-9 & Submit Not Started 		Office of Budget and Management	Start Over Next >
	6. Select Yes or No to be the administrator for the Payee	Welcome Complete Identifying Information Visited Address and Contact Not Started Payment Information Not Started Review W-9 & Submit Not Started	Do you wish to be the administrator for this Payee? ③ No Yes

SELECT YES TO BE THE ADMINISTRATOR for the PAYEE

	Ohio Office of Budget and Management	Start Over Next >
	1 Welcome Complete	Do you wish to be the administrator for this Payee? ⑦ ○ No ④ Yes
If you select Yes, enter the Payee	2 Identifying Information Visited	What type of Payee would you like to register?
information then click Next	3 Address and Contact Not Started	Individual ⑦ Tax Classification
Steps 8 and 9 are	4 Payment Information Not Started	Individual
N/A for Independent Providers	5 Review W-9 & Submit Not Started	Number "First Name "Last Name *SSN jeff smith 111-11-1111 ?

Choose Individual as Type of Payee

Choose Individual as Tax Classification

Enter your Social Security Number and First and Last Name

REGISTER IN OHIOPAYS

	Ohio Office of Budget and Management	Start Over Previous Next >
	1 Welcome Complete	Do you wish to be the administrator for this Payee? ⑦ ⑧ No Yes
10. Click Next	2 Identifying Information Visited	Do you have the administrator's email address? ⑦ ○ No ⑧ Yes
	3 Address and Contact Not Started	Please provide the administrator's email address rich@yahoo.com Verify Email What type of Payee would you like to register?
	4 Payment Information Not Started	Business v (?)
	5 Review W-9 & Submit Not Started	Tax Classification LLC - S Corporation \checkmark
		Taxpayer Identification Name *Business Name
		*EIN Jeff smith 11-111111 ⑦

				Start O	Ver Previous Next
11. Enter the Address and Contact information then click Next	Welcome Complete Identifying Information Complete Address and Contact Visited Payment Information Not Started	Address Country Ur Address Line1 Address City colo Partial Code 423	nited States 3 main st Jumbus	0	0
	5 Review W-9 & Submit Not Started	*State Ot *State Ot *County Fra *Remit Email ID rich	hio ranklin • hard@gov	• 0	0
		contact mormati	on		
		"First Name		*Last Name	T
		richard	0	bell	
		Title (optional)		*Telephone 614/111-1111	Fax Number (optional)
		"Email ID			

Enter your Address and contact information. You must use the Email address associated with your OH|ID.

REGISTER IN OHIOPAYS

	Office of Budget and Management		Start Over Previous Next >
12. Enter the Payment information then click Next	1 Welcome Complete 2 Identifying Information Complete 3 Address and Contact Complete 4 Payment Information Visited 5 Review W-9 & Submit Not Started	*Country United States	

You may not be able to enter your Bank Name. When you click next the system will automatically fill that in if you cannot input the information.

			[Start Over	Previous Submit
	1 Welcome Complete	Review		Expand	All Collapse All
	2 Identifying Information Complete	- Identifying Information	on		
	Address and Contact	Tax Classification	Social Security Number	First	lame Last Name
	Complete	Individual	111-11-2222	jeff	smith
0. Deview the M/O	4 Payment Information	- Address			
13. Review the W-9 information	5 Review W-9 & Submit Visited	123 main st columbus, OH 4311: USA (County: Franklin) Remit Email ID: richard@gov	9		
		First Name Last Nam	e Title Telephone	Fax Number	Email ID
		richard bell	614/111-1111		rich@yahoo.com
		 Payment Information 	1		
		Country Bank Name	Account Type	Account Number	Routing / ABA Number
		USA JP MORGAN C	HASE Checking Account	1111111	22222222222

Review the information and ensure everything has been entered correctly.

	Welcome Complete Z Identifying Information Complete	Review	ition	Expand /	All Collapse All
	3 Address and Contact Complete	Tax Classification	Social Security Number	First Na	me Last Name
14. Click Create W-9 to create a W-9 with the	4 Payment Information Complete	- Address	- Address		
	5 Review W-9 & Submit Valled	Columbus, OH 43 USA (County: Franklin) Remat Email ID: nchard@gov)		
information you provided	5.	First Name Last Na	ame Title Telephone	Fax Number	Email ID
		· Payment Informati	on		nongyanoo.com
		Country Bank Name	Account Type	Account Number	Routing / ABA Number
		USA JP MORGAN	CHASE Checking Account	11111111	222222222
				_	

	Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service Control Control C	Give Form to the requester. Do not send to the IRS.
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	IEEE SMITH	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the 4 Exemption following seven boxes.	ons (codes apply only to ties, not individuals; see s on page 3):
	o ≥ industrious proprietor or a composition ≥ composition ≥ restance proprietor by Exempt pay	ee code (if anv)
	S = Limited liability company. Enter the tax classification (CuC composition, SuS composition, PuPartnershin) >	
	b Vete: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check Exemption (from FATCA reporting
	# E LL C if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is closed in any concess. Character as isole-member LLC that is disregarded from the owner of the standard from the owner of the LLC is closed if any concess.	0
	e is disregarded from the owner about check the appropriate box for the functional case of the owner.	
15 Review and Save	Other (see instructions) Applies to accompany	unts maintained outside the U.S.)
	B Address (number, street, and apt. or suite no.) See instructions. Requester's name and address ((optional)
the W-9 to your	5 123 MAIN ST	
computer then		
computer them	7 List account number(s) here (optional)	
close this window	which every fields are also been as a second se	
	Part I Taxpayer Identification Number (TIN)	
	Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social security number	ar 🛛
	backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident atien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TW. later.	1 - 2 2 2 2
	Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Employer identification	n number
	Number To Give the Requester for guidelines on whose number to enter.	
	Part II Certification	
	Under penalties of perjury, I certify that:	
	 The number shown on this form is my correct taxpayer identification number (or I an waiting for a number to be issued to me). I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by th Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has no longer subject to backup withholding; and 	; and he Internal Revenue s notified me that I am
	3. I am a U.S. citizen or other U.S. person (defined below); and	
	4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
	Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to back you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retriement transgment (RA), and other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instruction of the instruction of the secure of	up withholding because interest paid, generally, payments ons for Part II, later.

Review the information and ensure everything has been entered correctly.

				Start Over	< Previous Submit
	1 Welcome Complete	Review		Expand	All Collapse All
	2 Identifying Information Complete	✓ Identifying Information			
	Address and Contact	Tax Classification	Social Security Number	r First N	lame Last Name
	Complete	Individual	111-11-2222	jeff	smith
	4 Payment Information	← Address			
16. Click Submit	6 Review W-9 & Submit Visited	123 main st columbus, OH 43 USA (County: Franklin)		
		Remt Email ID: richard@gov			
		First Name Last N	ame Title Telephone	Fax Number	Email ID
		richard bell	614/111-1111		rich@yahoo.com
		- Payment Informat	ion		
		Country Bank Name	Account Type	Account Number	Routing / ABA Number
		USA JP MORGA	N CHASE Checking Account	11111111	222222222

	U Welcome Complete	Individual	Social Security Number	jeff	e Last Name smith
17. Select the checkbox and click Continue to affirm the W-9 was completed correctly	2 Identifying Information Complete 3 Address and Contact Complete 4 Payment Informati Complete 5 Review W-9 & Sub Visited	✓ Address 123 main st columbus, OH 4311 USA (County: Franklin) County: Franklin) to affirm that the attached ₩.9 ha so in the IRS Form ₩.9.	19 as been completed in accordance Canc	e with the General	ail ID
		Payment Information Country Bank Name USA JP MORGAN C	n Account Type CHASE Checking Account	Account F Number N 11111111 2	Routing / ABA Number

			lax classification	Jocial Security Number	ei i iistiik	ame Last Name
	1 Welcome Complete		Individual	111-11-2222	jeff	smith
 18. Read the Terms & Conditions 19. Select the checkbox and click Continue to accept the Terms of Agreement 	Identifying Informati Complete Address and Contac Complete Payment Information Complete Review W-9 & Subm Visited	Terms & Coi Make sure yr By submitting th authorized to: (r registration pro- in writing elsewi following: Account Inform You will be resp address, conta- gadress, conta- gad	nditions ou read terms of agreement his Payee self-registration, tt) register as a Payee for the cess; and (iii) enter into this here between the parties, by ation onsible for ensuring the acc 2 Information and banking in he data to keep it true, accu e to accept the Terms of Ac USA JP MORG	At fully before submitting your registra the Payee (hereafter, you) certify and wa State of Ohio; (ii) file ail of the informating Terms of Agreement with the State of Oh submitting this Payee self-registration, y uracy of your data. This includes legal b formation. It is important that all information formation. It is important that all information reate, current and complete. Changes to greement GAN CHASE Checking Account	ation rrant that you are on requested in this io. Unless agreed to you agree to the usiness name, fism is correct for steps to update your account must be el Continue t 11111111	mail ID :h4811@yahoo.com Routing / ABA Yumber 222222222
20. Click OK to complete registering your business	Welcome Complete Identifying Informat Complete Address and Contat Complete	lon ct	Individual Address 123 main st columbus, OF USA	Social Security Number	rırst ivan	e Last Name smith
NOTE: If the registration was not auto approved, it will be routed to the state for manual review and processing. You will be notified by email within 7- 10 business days of approval or if further action is required	Payment Informatio Complete Review W-9 & Subn Visited	n	Your Registratio approved. You can find you Business tile. Payment Inform Country Bank Na USA JP MORE	In is submitted and has been auto ar Payee ID on the Find My CK nation me Account Type GAN CHASE Checking Account	Fax Number E	mail ID ch4811@yahoo.com Routing / ABA Number 2222222222

If you need assistance do not hesitate to reach out by email (obm.sharedservices@obm.ohio.gov) or phone (877-644-6771) or contact your County Board / COG Provider Support Department.