



**Public Employees' Retirement System of Nevada**  
693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131  
5740 S. Eastern Ave., Suite 120, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934  
Toll Free 1-866-473-7768 Website www.nvpers.org

## Vendor Website Signature Authorization Designation Form

Vendor Name: \_\_\_\_\_ PERS Vendor #: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Vendor Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

\_\_\_\_\_  
Vendor Web Administrator (Print Name and Title)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

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**The Vendor Web Administrator may designate Vendor Specialists to perform vendor reporting duties through the PERS website. The login that will be provided to the Vendor Web Administrator and Vendor Specialist is intended for the specified user only. The NVPERS website contains confidential information per NRS 286.110 and review by anyone other than the intended user is strictly prohibited unless authorized by PERS. Violation of this agreement may terminate these designated authorizations.**

\_\_\_\_\_  
Vendor Specialist (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Last Four Digits of SSN

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Vendor Specialist (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Last Four Digits of SSN

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Vendor Specialist (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Last Four Digits of SSN

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

**(Note: This form supersedes all previously submitted forms)**