



**Community Action Program East Central Oregon**  
*Serving Umatilla • Morrow • Gilliam • Wheeler Counties*

1565 N First Street, Suite #1 Hermiston, OR 97838

Phone: 541.289.7755 or 800.214.4776

Fax: 541.289.7757

[www.capeco-works.org](http://www.capeco-works.org)

## Wood Vendor Form

**To be filled out by the wood vendor:**

Name: \_\_\_\_\_

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

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

Social Security Number: \_\_\_\_\_

**Please check the box that applies only.**

I, \_\_\_\_\_ sold wood to \_\_\_\_\_  
(Vendor Name) (Client's Name)  
On \_\_\_\_\_ for the amount of \$ \_\_\_\_\_.  
(Date)

I, \_\_\_\_\_ agree to deliver wood to \_\_\_\_\_  
(Vendor Name) (Client's Name)  
At \_\_\_\_\_  
(Address)  
Upon payment of \$ \_\_\_\_\_ that will be received from the client.

**I certify that the information provided is true and accurate to the best of my knowledge.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_