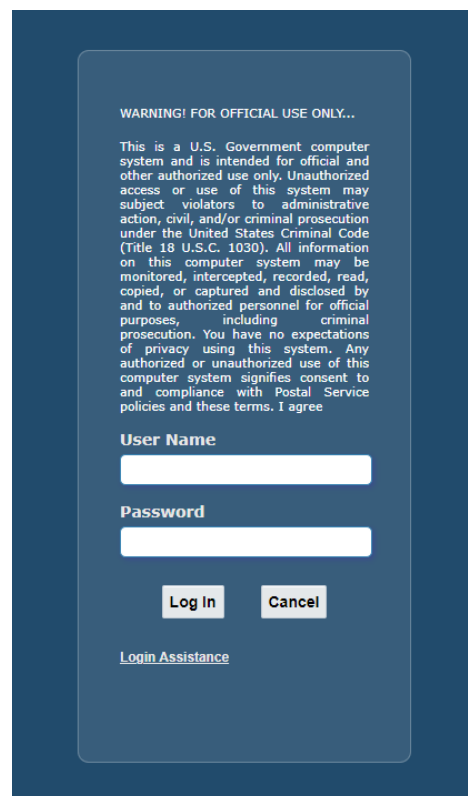


USPS iSupplier: Standard Work Instructions (SWI)

Account Creation

- Suppliers can access the electronic invoicing system (iSupplier) at <https://einvoice.usps.com> to submit invoices and credit memos, once they have an account.
- Accounts are created by USPS when the contract is setup for electronic invoicing, by your Contracting Officer.
- Username and password are assigned, when the account is created, by our accounts team.
- Please note that your username is typically your email address unless you have more than one account setup, for iSupplier.
- Password setup links are sent via email when the account is created.
- If you do not have a password or your password has expired, please see “Reset Password” steps for more information on how to set up or reset your password.
- If you need further assistance, please email einvoice@usps.gov .



WARNING! FOR OFFICIAL USE ONLY...

This is a U.S. Government computer system and is intended for official and other authorized use only. Unauthorized access or use of this system may subject violators to administrative action, civil, and/or criminal prosecution under the United States Criminal Code (Title 18 U.S.C. 1030). All information on this computer system may be monitored, intercepted, recorded, read, copied, or captured and disclosed by and to authorized personnel for official purposes, including criminal prosecution. You have no expectations of privacy using this system. Any authorized or unauthorized use of this computer system signifies consent to and compliance with Postal Service policies and these terms. I agree

User Name

Password

[Login Assistance](#)

Please note: The CO completes the form not the Supplier. If the Supplier is already a registered supplier in Accounts Payable system (APEX), then only fill the highlighted sections. **IMPORTANT:** The Supplier must designate an appropriate First Administrator User; this user is an Admin level user for the Supplier. This user is responsible for delegating their backup and delegating invoice submitter(s) role for individual contracts within their company. The CO will have to work with the Supplier to determine who will be delegated Supplier Administrative privileges. Once the form is complete, the CO sends the form to San Mateo for processing. Once the form is processed by the San Mateo ASC, the New Supplier User will receive an email from the USPS National Accounting System.

Accounts Payable Supplier Maintenance Request	
Supplier Number: _____	Site Number: _____
SMG Employee: _____	Date entered: _____
Action Requested: New Supplier <input type="checkbox"/> New Site <input type="checkbox"/> Address Change for the Existing Site <input type="checkbox"/>	
Name Change <input type="checkbox"/> TIN Change <input type="checkbox"/>	
Note: Attach W-9 Form http://www.irs.gov/	
Electronic Invoicing Registration <input type="checkbox"/> Provide Information on Page 2	
Supplier's Name: _____	
If a name change, provide existing Accounts Payable Supplier Name: _____	
Supplier's TIN: _____	
If a TIN change, provide the existing TIN: _____	
Supplier Type: (place an 'x' next to the one that applies)	
Tax Identification Number EIN <input type="checkbox"/> or SSN <input type="checkbox"/>	
Postal Employee <input type="checkbox"/>	
Foreign <input type="checkbox"/>	
Government Agency <input type="checkbox"/>	
Self-Employed <input type="checkbox"/>	
Tax Authority <input type="checkbox"/>	
Utility <input type="checkbox"/>	
Sole Proprietor <input type="checkbox"/>	
If this request is to ADD a site to an existing Accounts Payable supplier record, or change a supplier's name or TIN, please indicate the existing Accounts Payable Supplier Number: _____	
Supplier Number: _____	
Supplier's Remit To Address: _____	
Street: _____	
City: _____	
State: _____	
ZIP+4: _____	
If the supplier is 1099-reportable, the Remit To Address listed above will be used to mail the year-end IRS Form 1099. If the 1099 address should be different, fill it in below.	
If Supplier Number and Site are known for the 1099 reporting, please provide:	
Supplier Number: _____	Site: _____
Street: _____	
City: _____	
State: _____	
ZIP + 4: _____	
NOTE: If the supplier requests payment via Electronic Fund Transfer (EFT), a properly completed	

Accounts Payable iSupplier Maintenance Request			
Supplier Number: _____	Site Number: _____		
SMG Employee: _____	Date entered: _____		
If this request is to REGISTER for Electronic Invoicing Process, please provide the information to register up to TWO Administrator Users below.			
First Administrator User			
Email Address (*): _____			
Contact Title: _____			
First Name (*): _____			
Middle Name: _____			
Last Name (*): _____			
Job Title: _____			
Telephone Number: _____			
Fax Number: _____			
Second Administrator User			
Email Address (*): _____			
Contact Title: _____			
First Name (*): _____			
Middle Name: _____			
Last Name (*): _____			
Telephone Number: _____			
Fax Number: _____			
Comments: _____			
(*) Return to:			
Internal Use Only			
Contract #	Contract Mod	CO Initials	Date