



# Supplier Diversity Program

State Farm's "Like a good neighbor" theme is more than an advertising slogan. It's a way of life for State Farm® associates. We are there – when our customers have a question, when they have an insurance need and, most importantly, when they have a loss. We are there with friendly, helpful, personal service to keep the promise each of us has made.

Our business partners are an important part of helping us honor our commitment to customers. We are dedicated to developing partnerships with suppliers who share our goal of providing quality products and services.

We believe our supplier base should include businesses as diverse as the customers we serve. State Farm promotes including businesses owned by minorities, women, and people with disabilities in our selection process.

I strongly support our company's Supplier Diversity Program. I encourage everyone with purchasing responsibilities to seek businesses owned by minorities, women, and people with disabilities who meet our standards of quality, service and price.

Being good neighbors is a tradition as old as our company and as solid as our future.

Chairman and Chief Executive Officer

## Instructions

Upon completion, please send this form electronically to the Supplier Diversity team at [supplierdiversity@statefarm.com](mailto:supplierdiversity@statefarm.com). Your business must be certified as minority-owned, woman-owned, veteran-owned or a person with a disability in order to participate in the State Farm Supplier Diversity Program. In addition to your completed application, a copy of your certificate should be enclosed. If you are not currently certified or are obtaining certification, please forward your company information to the Supplier Diversity Team once the certification process is complete.

Legal Company Name: \_\_\_\_\_

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

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

Contact Person: \_\_\_\_\_

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

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Date Founded: (mm/dd/yyyy) \_\_\_\_\_

Annual Sales: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

## Ownership

Please list the names and ownership interest of all majority owners

Owner	Ownership
_____	_____
_____	_____
_____	_____
_____	_____

**Classification** (please select one)

- |   |   |
|---|---|
| <input type="checkbox"/> African American/Black                     | <input type="checkbox"/> Hispanic/Latino American |
| <input type="checkbox"/> Asian American                             | <input type="checkbox"/> Native American          |
| <input type="checkbox"/> Veteran                                    | <input type="checkbox"/> Disabled Veteran         |
| <input type="checkbox"/> Disabled                                   | <input type="checkbox"/> Women Owned              |
| <input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender (LGBT) |   |

**Certification:** Please provide the following information:

**Organization:** \_\_\_\_\_

**Certification Number:** \_\_\_\_\_

**Expiration Date:** (mm/dd/yyyy) \_\_\_\_\_

Attach copy of Certificate

**Type of Business / Search Keywords**

Please describe the products and services your company provides in the box provided below. This information is very important since it will be used by our buyers to search for vendors in our Supplier Database.

Alongside your certificate, you may attach brochures that describe your company's products and services. If you have questions, please email the Supplier Diversity team at [supplierdiversity@statefarm.com](mailto:supplierdiversity@statefarm.com).

The undersigned hereby certifies that the information provided above is current, complete and accurate as of the date below. The undersigned also promises to provide notice should business ownership or classification change during the life of the business.

**Signature:** \_\_\_\_\_

**Printed or typed name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** (mm/dd/yyyy) \_\_\_\_\_

Submit this form to [supplierdiversity@statefarm.com](mailto:supplierdiversity@statefarm.com).