



In order to receive an electronic payment from the State of Mississippi, an entity must be registered in both the MAGIC and PAYMODE system. There are three steps to finish the process.

1. Registering as a Supplier/Grantee in the State of Mississippi
2. Emailing your W-9 to OFMMagic@dfa.ms.gov.
3. Registering in Paymode

STEP ONE:

First, you must confirm your entity is a registered supplier/grantee in the State of Mississippi, and if not, register in the MAGIC system.

- **Registered supplier/grantee:** Please log into the system and confirm the information on record with the State of Mississippi. <https://portal.magic.ms.gov/iri/portal>

-or-

- **Check to confirm a registered supplier/grantee:** If you are not sure if your entity has a User ID, please click on this link to confirm.
<http://merlin.state.ms.us/merlin/predef.nsf/MAGICVendorInfo?OpenForm>

-or-

- **Password Reset:** To request your User ID and Password, please email Mash@dfa.ms.gov. Use "Vendor ID Request" in the subject line of the message and include the following information.

MAGIC Vendor Number
Vendor Name
Contact Name
Contact Email
Contact Phone

-or-

- **Register to become a supplier/vendor:** See instructions on the following page.



State of Mississippi Supplier/Grantee Registration

If you are not a registered supplier/grantee, please proceed to this page.

https://sus.magic.ms.gov/sap/bc/webdynpro/sapsrm/wda_e_suco_sreg?sap-client=100#

In the "General Company Information" section, fields with asterisks are mandatory.

1. Place a check mark in the Grantee box to register as a Grantee.
2. Select the Type of Grantee field. As an organization, you will select CRM-ORG from the dropdown menu.
3. Enter the name of your organization in the Name of Company
4. Enter a Federal Employer Identification Number
5. Enter a Phone Number
6. Enter an E-Mail Address

General Company Information

On-Behalf of (Internal Only):

Supplier:

Grantee:

Type of Grantee: CRM-INC ▾

* Name of Company:

Doing Business As (DBA):

Business Structure: ▾

Grantee Agency:

* Enter either FEIN or SSN

Federal Employer Identification No:

Social Security No:

D-U-N-S Number:

Communication

* Phone Number:

Fax Number:

* E-Mail Address:

The chart below is an example of the best way to enter the numbers into the form:

As required, complete/review the following fields:

Field	R/O/C	Description
Federal Employer Identification No	Required	Example: 58-2345679
D-U-N-S Number:	Optional	Example: 234567890
Phone Number:	Required	Example: 404-555-1234
Fax Number:	Required	Example: 404-555-1235

For fields that are not mandatory, such as “Business Structure”, you can select any of the following options:



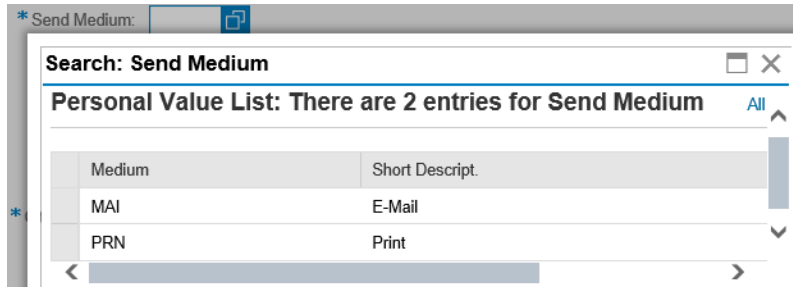
A dropdown menu with a red border. The menu is open, showing a list of business structure options. The top option, "LLC", is highlighted in blue. Below it are "CCORP", "SCORP", "Partnership", and "Individual". A small downward arrow is visible in the top right corner of the dropdown box.

NOTE: The “Business Structure” field is **NOT** required.

If you have a DUNS Number, please enter that information. **NOTE:** This is a nine-digit number provided by Dun and Bradstreet.

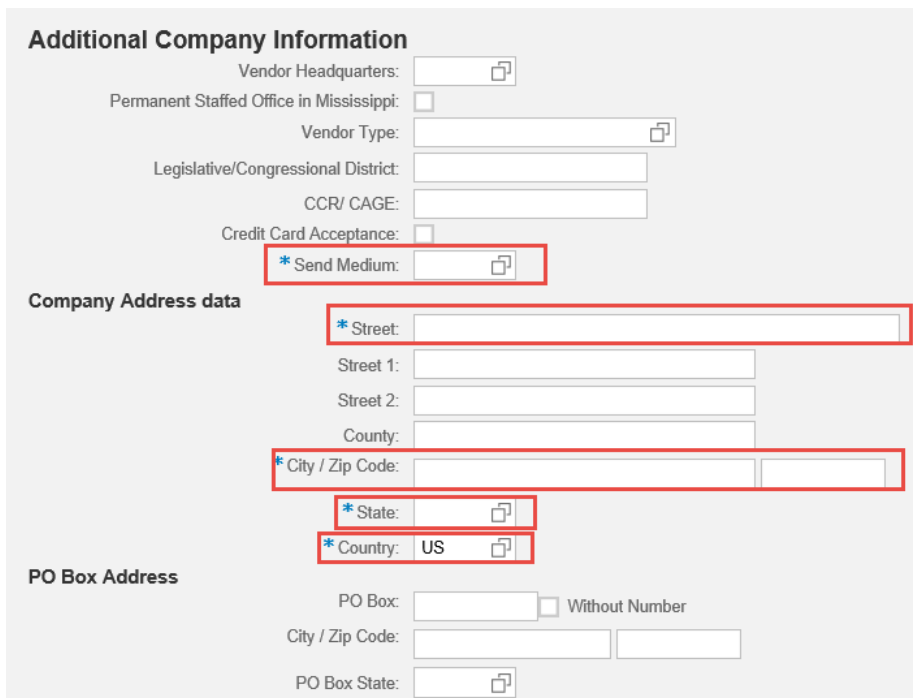
In “Additional Company Information” the following is required:

7. The “Send Medium” you have the options to choose how you want to receive notifications:



In “Company Address data” the following is required:

8. Enter your “Street” Address
9. Enter the “City/Zip Code”
10. Enter the “State”
11. Enter the “Country”



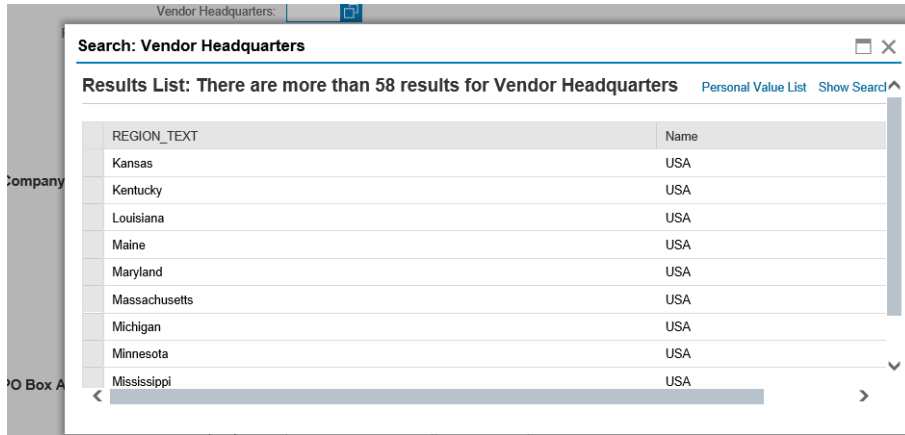
The screenshot shows the "Additional Company Information" form. The following fields are highlighted with red boxes to indicate they are required:

- * Send Medium: [Dropdown menu]
- * Street: [Text input field]
- * City / Zip Code: [Text input field]
- * State: [Dropdown menu]
- * Country: US [Dropdown menu]

Other visible fields include: Vendor Headquarters, Permanent Staffed Office in Mississippi, Vendor Type, Legislative/Congressional District, CCR/ CAGE, Credit Card Acceptance, Street 1, Street 2, County, PO Box, PO Box Without Number, City / Zip Code, and PO Box State.

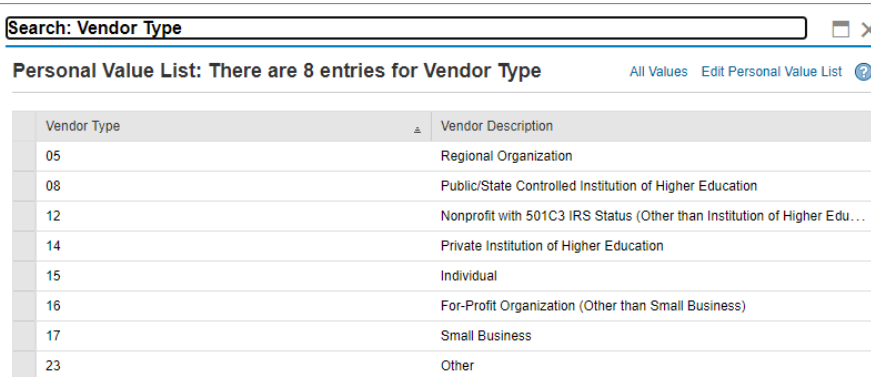
NOTE: If you have a Post Office Box, please enter that information as well. One of your addresses must match the address listed on your W-9.

For fields that are not mandatory such as “Vendor Headquarters” you may select from the menu drop down options as follows:



12. Click “*Permanent Staffed Office in Mississippi*”

13. Click “Vendor Type” Field and select from the list of options below:



14. If your organization takes credit cards, please select the box.

15. The “Contact Person Information” area the following is required:

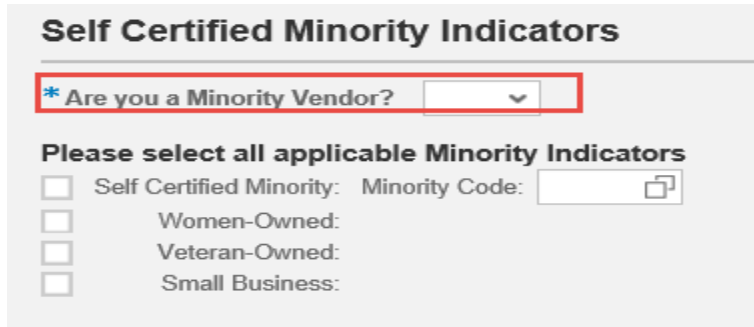
The screenshot shows the "Contact Person Information" form. The following fields are highlighted with red boxes to indicate they are required:

- * First Name: [Text Input]
- * Last Name: [Text Input]
- * Form of Address: [Dropdown Menu]
- * Phone Number: [Text Input]
- * E-Mail Address: [Text Input]
- * Language: EN [Dropdown Menu]
- * Country: US [Dropdown Menu]

Other visible fields include: Academic Title: [Dropdown Menu], Department: [Text Input], Fax Number: [Text Input], and a "Copy Company Data" button.

16. You will **not** need to enter any data into the “Product Categories Provided” section of the document.

17. Check any fields that apply in the “Self-Certified Minority Indicators”



The screenshot shows a form section titled "Self Certified Minority Indicators". At the top, there is a dropdown menu with the text "* Are you a Minority Vendor?". Below this, there is a heading "Please select all applicable Minority Indicators" followed by four checkboxes with labels: "Self Certified Minority: Minority Code:", "Women-Owned:", "Veteran-Owned:", and "Small Business:". A small icon is visible next to the "Self Certified Minority" label.

18. Read the Data Privacy Statement and check the box.



The screenshot shows a form section titled "Important Notice Must Read". It contains a checkbox followed by the text "* Yes, I have read the data privacy statement and accept the terms.:". Below this is a paragraph of text: "I understand that I am submitting a registration request to obtain access to the State of Mississippi's statewide procurement system, MAGIC. Submission of this request does not automatically mean I will be granted access to the MAGIC system. I further understand that if I am granted access, my registration may be revoked at any time. I understand that registering as a supplier/grantee in MAGIC does not mean that I will be awarded business or a grant by state government entities."

19. Click the Send Button in the top left corner of the screen.

Once the form is submitted, you will receive one confirmation email with your MAGIC vendor number and a second email with your MAGIC password. Please save this information.

If you need any help with this process, please call MMRS Call Center at 601-359-1343 Option 2.

STEP TWO:

Email a W-9 to OFMMagic@dfa.ms.gov. Please include your vendor number in the email. NOTE: Make sure you address BOX 3 on your W-9. If “other” is selected, you must list a category on the corresponding line.



State of Mississippi Supplier/Grantee Paymode Registration

STEP THREE:

3-5 business days after submitting your W-9, you may register with Paymode. Visit <https://www.paymode.com/mississippi> to register. A step by step guide may be found on the DFA website.

If you any questions, you may contact Paymode Customer Service at enrollment@paymode-x.com or 800-331-0974.