SUBSTITUTE W-9 FORM

REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION

1. Complete general information:

Taxpayer Name _____ Phone Number _____

Business Name (if applicable) _____

Address _____

City _____ State _____ ZIP Code _____

2. Circle the most appropriate category below: (circle only one)

1) Individual (not an actual business.)
2) Joint account (two or more individuals.)
3) Custodian account of a minor.
4) a) Revocable savings trust (grantor is also trustee.)
   b) So-called trust account that is not a legal or valid trust under state law.
5) Sole proprietorship (using a social security number for the taxpayer ID.)
6) Sole proprietorship (using a federal employer identification number for taxpayer ID.)
7) A valid trust, estate, or pension trust.
8) Corporation.
9) Association, club, religious, charitable, educational, or other not-profit organization (for entities that are exempt from federal tax, use category 13 below).
10) Partnership.
11) A broker or registered nominee.
12) Account with the U.S. Department of Agriculture in the name of a public entity that receives agricultural program payments.
13) Government agencies and organizations that are tax-exempt under Internal Revenue Service guidelines (i.e., IRC 50(c)3 entities).

3. Fill in your taxpayer identification number below: (complete only one)

1) If you circled number 1 - 5 above, fill in your Social Security Number:

   ☐☐☐ - ☐☐ - ☐☐☐☐

2) If you circled number 6 - 13 above, fill in your Federal Employer Identification Number (EIN):

   ☐☐ - ☐☐☐☐☐☐☐

4. Sign and date the form:

Certification – Under penalties of perjury, I certify that the number shown on this form is my correct taxpayer identification number. If I circled category 13 above, I also certify that my agency or organization is tax-exempt per Internal Revenue Service guidelines and not subject to backup withholding.

Signature _____ Date _____

Print Name _____ Title _____

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