

FORM W-9 TAXPAYER IDENTIFICATION NUMBER REQUEST

Please complete this form. The City is required by law to obtain this information. Payments may be subject to federal tax backup withholding for failure to provide this information.

INSTRUCTIONS: Complete PART 1 by filling in the row of boxes that corresponds to your tax status. Complete PART 2 if you are exempt from Form 1099 Reporting.

PART 1 TAX STATUS: A Sole Proprietor may have a "A Doing Business As" Trade Name, but the legal name is the business owner.
 A Partnership may have a "A Doing Business As" Trade Name, but the legal name is the list of the partners.
 A Corporation may use an abbreviated name or its initials, but its legal name is the name on the Articles of Incorporation.

Individual's Name	Individual's Social Security #	
Sole Proprietor Individual's Name	Individual's Social Security #	Business or Trade Name
Name of Partnership	Partnership's Identification #	Partnership's Legal Name (Name of Partner)
Name of Medical Corporation	Employer Identification #	
Name of Corporation or Entity	Employer Identification #	

PART 2 EXEMPTION: If exempt from 1099 reporting, enter the applicable number listed below in this box:

1. Corporation
2. Tax Exempt Charity under 501(a), or IRA
3. The United States or any of its agencies or instrumentalities
4. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions
5. A foreign government or any of its political subdivisions