Form **W-9** (Rev. November 1999)

Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do NOT send to the IRS.

HILEH	ai Revenue Service				
type	Name (If a joint account or you changed your name, see Specific Instructions on page 2.)				
5 l	Business name, if different from above. (See Specific Instructions on page 2.)				
print	Check appropriate box: Individual/Sole proprietor	Corporation Partnership	Other •	·	
Please			Requester's name and address (optional)		
۵	City, state, and ZIP code				
Part I Taxpayer Identification Number (TIN)			List account number(s) here (optional)		
indi (SS	er your TIN in the appropriate box. For viduals, this is your social security number N). However, if you are a resident alien OR a proprietor, see the instructions on page 2.	Social security number			
For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 2.		OR	Part II	Withholding (See the instructions	
see	e: If the account is in more than one name, the chart on page 2 for guidelines on whose aber to enter.	Employer identification number		on page 2.)	
Pa	rt III Certification		1		

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.

Certification instructions. You must cross out item **2** above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item **2** does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 2.)

Sign
Here Signature ▶ Date ▶

Purpose of form. A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9, if you are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are an exempt payee.

If you are a foreign person, IRS **prefers** you use a Form W-8 (certificate of foreign status). After December 31, 2000, foreign persons **must** use an appropriate Form W-8.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- **1.** You do not furnish your TIN to the requester, or
- **2.** You do not certify your TIN when required (see the Part III instructions on page 2 for details), or
- **3.** The IRS tells the requester that you furnished an incorrect TIN, or
- **4.** The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

Cat. No. 10231X

Form **W-9** (Rev. 11-99)

Iowa Department of Human Services

Centralized Employee Registry Contractor Reporting

PAYOR OF INCOME:

	Telephone Number: Federal ID Number:				
	5 6 3 - 3 2 6 - 7 7 1 1 4 2 - 6 0 0 4 4 6 3 - 0 0 1 (FEIN plus 3-digit lows location suffix)				
Name:	CITTY OF DAVENPORT				
Street Address:	2 2 6 W 4 T H S T R E E T				
Audi 635.					
City:	DAVENPORT State: LA Zip: 52801-				
Date of Contracted Service: Day Year					
CONTRACTOR:					
	Date of Birth: Social Security Number:				
	Month Day Year				
Last Name:	Middle First Name: Initial:				
Street Address:					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
City:					
Reporting Requirements:					
Mail this form within 10 days of contract to:					
Centralized Employee Registry PO Box 10322					

If you have questions regarding reporting requirements, or need an additional supply of this form, please call 515-281-5331.