

# 9HQGRU \$SSOLF DWLR

3XUFKDV LQJ 'HSW %UDGIRUG +HLJKWV 5G \*DVWRQ  
SXUFKDV LQJ#JDVWRQ N QF XV

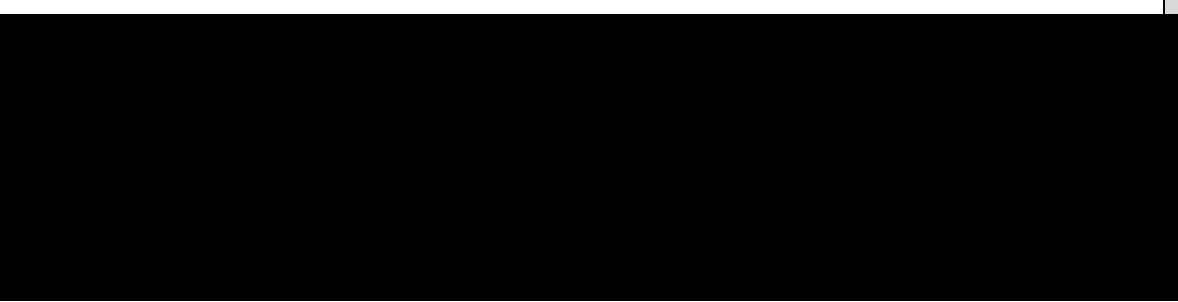
9HQGRU \$GGUHV V		5HPLW WR \$GGUHV V LI GLIIHUHQ	QW
1DPH		1DPH	
\$GGUHV V		\$GGUHV V	
&LW\		& L W \	
6WDWH =LS		6WDW&RXQW\ =LS	
&RQWDFW 1DPH		7HOHSKRQH )D[	
(PDLO \$GGUHV V			

VV (QWHUSULVH \$PHULFDQ \$VL DQ  
 +LVSDQ UEFDQWLYRPSHQ DQGRU WKH 'LVDEO  
 \SOKHDV \$PDRSUL DWH VSDFH  
 \$IULFDQ \$PHULFDQ  
 B \$VL DQ \$PHULFDQBBBBB 'LVDEOHG %XVLQHVV (QWHUSULVH  
 B 1DWLYH \$PHULFDQBBBBB 1RQ 3URILW :RQ &HQWHU  
 B +LVSDQLFBBBBB 6RFLDOO\ (FRQRPLFDQO\ 'LVDGYDQW DJH  
 B 'LVDEOHG 2ZQH G %XVLQHVV  
 VFRQJJE&H V RU 1R

\$UH \RX FROOHFWLRQ W & H W & U H P H Q W U V R D Q G H W D M W L ( P S P H Q W 6 \ V W H P "	<(6	12
5(63216(,6 5(48,5('		
\$UH \RX DQ ,QGLYLGXDO 6ROH 3URSULHWRU"		
\$UH \RX D /IDELVH Q V I & R P S D Q \ "		
\$UH \RX ,QFRUSRUDWHG"		
'R \RX SURYLG H SURGXFWV"		
\$UH \RX KHDGTXDUWHUH G LQ 1RUWK &DUROLQD"		

7KLV DSSOLF DWLRQ DORQJ ZLWK WKH DQWLRP K D Q G O , 5 H Q R F U V Z L V K L Q T X W R  
 \*DVWRQ &RXQW\ 6FKRROV

BB  
 6LJQ F D S R Q G R Q J & R P S D Q \ 2 I L F L D O R U 3 D \ H W H



Form **W-9**

**Request for Taxpayer  
Identification Number and Certification**

Give Form to the

[Redacted content]