# Form W-9

## Request for Taxpayer Identification Number and Certification

**Give Form to the requester. Do not send to the IRS.**

<table>
<thead>
<tr>
<th><strong>1 Name</strong> (as shown on your income tax return). Name is required on this line; do not leave this line blank.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2 Business name/disregarded entity name, if different from above</strong></td>
</tr>
<tr>
<td><strong>3 Check appropriate box for federal tax classification; check only one of the following seven boxes:</strong></td>
</tr>
<tr>
<td>- Individual/sole proprietor or limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)</td>
</tr>
<tr>
<td>- Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)</td>
</tr>
<tr>
<td><strong>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</strong></td>
</tr>
<tr>
<td>- Exempt payee code (if any)</td>
</tr>
<tr>
<td>- Exemption from FATCA reporting code (if any) (Applies to accounts maintained outside the US)</td>
</tr>
<tr>
<td><strong>5 Address (number, street, and apt. or suite no.)</strong></td>
</tr>
<tr>
<td><strong>6 City, state, and ZIP code</strong></td>
</tr>
<tr>
<td><strong>7 List account number(s) here (optional)</strong></td>
</tr>
</tbody>
</table>

### Part I  Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. 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 3.

Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

<table>
<thead>
<tr>
<th><strong>Social security number</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employer identification number</strong></td>
</tr>
</tbody>
</table>

### Part II  Certification

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; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) is indicating that I am exempt from FATCA reporting is correct.

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 3.

<table>
<thead>
<tr>
<th><strong>Sign Here</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date</strong></td>
</tr>
</tbody>
</table>

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

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Cat. No. 10231X  Form W-9 (Rev. 12-2014)
ACH VENDOR/MISCELLANEOUS PAYMENT
ENROLLMENT FORM

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

AGENCY INFORMATION

<table>
<thead>
<tr>
<th>AGENCY IDENTIFIER:</th>
<th>111036183</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGENCY LOCATION CODE (ALC):</td>
<td>36000102</td>
</tr>
</tbody>
</table>

ADDRESS

P.O. Box 149345
Austin, TX 78714-9345

CONTACT PERSON NAME:
ICE Health Service Corps Medical Claims Processing

TELEPHONE NUMBER
1-800-479-0523

ADDITIONAL INFORMATION
Fax completed form to (512) 460-5158 OR (512) 460-5538

PAYEE/COMPANY INFORMATION

NAME

ADDRESS

CONTACT PERSON NAME

TELEPHONE NUMBER:

FINANCIAL INSTITUTION INFORMATION

NAME:

ADDRESS:

ACH COORDINATOR NAME

TELEPHONE NUMBER:

NINE-DIGIT ROUTING TRANSIT NUMBER:

DEPOSITOR ACCOUNT TITLE:

DEPOSITOR ACCOUNT NUMBER:

LOCKBOX NUMBER:

TYPE OF ACCOUNT:

☐ CHECKING

☐ SAVINGS

☐ LOCKBOX

SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL
(Could be the same as ACH Coordinator)

TELEPHONE NUMBER:

( )

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SF 3881 (Rev. 2/2003)
Prescribed by Department of Treasury
31 U.S.C. 3322; 31 CFR 21