Handout #9





### **VENDOR INFORMATION**

The participant/representative must complete this form for all business entities that provide services and supports to the consumer under the CDC+ program. Such business entities include independent contractors, for-profit and not-for-profit agencies and other businesses, and retail merchants that sell supplies. For all business entities EXCEPT corporations, a completed IRS Form W-9 must also be attached. Every person who provides direct care services to a CDC+ participant must have passed a level 2 background screening before they can provide services. If this vendor wishes to have pay checks direct deposited, a completed Direct Deposit (Electronic File Transfer/EFT) Form can be submitted with the vendor packet or can be submitted separately.

Participant Name:	Johnny Sample					
Participant ID #:	0011111	Date: 9/3/9				
Vendor Name:	Isabel Independent Contractor					
Address:	123 Main St					
City State Zip:	apylown FL 12345					
Phone Number: $(\times \times \times) \times \times - \times \times \times$						
Tax ID/FEIN:	IN: 123456789					
1. Specify this vendor's provider type (select one).  Agency/Vendor (A/V)  Corporation  Limited Liability Company [attach a completed IRS Form W-9]  Partnership [attach a completed IRS Form W-9]						
Independent Contractor [sole proprietor, self-employed](IC)  [attach a completed IRS Form W-9]						
2. Provider's Relationship to CDC+ Participant:  Spouse Child Sibling Grandparent Grandchild (above includes step-relationships)						
3. Provider is a Medicaid-enrolled provider.  Provider has a current professional license from FL Dept of Health Yes □ No □  If No to both, level 2 background screening clearance letter is attached. Yes □						

# (Rev. October 2007)

## **Request for Taxpayer Identification Number and Certification**

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

Traine (as shown on your moonie tax retain)							
e 2.	Isabel Independent Contractor						
n page	Business name, if different from above						
Print or type Specific Instructions on	Check appropriate box: ✓ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶			Exempt payee			
	Address (number, street, and apt. or suite no.)  Requester's name and			address (optional)			
	123 Main Street Patty Participant City, state, and ZIP code Patty Participant		articipant, CDC+ ID #1234567				
တို	Anytown, FL 12345 Any City, FL 2222						
See	List account number(s) here (optional)						
Pa	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 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 <i>How to get a TIN</i> on page 3.				urity number 45 6	3789		
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.			Employer identification number				
Pa	rt II Certification						
Unde	er penalties of perjury, I certify that:						
	e number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and						
F	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	I am a U.S. citizen or other U.S. person (defined below).						
within For a	tification instructions. You must cross out item 2 above If you have been notified by the I holding because you have failed to report all interest and dividends on your tax return. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of dingement (IRA), and generally, payments other than interest and dividends, you are not required your correct. The Sec the instructions on page 4.	r real estate t ebt, contribu	ransactions tions to an	s, item 2 does i individual retire	not apply. ment		

#### Signature of U.S. person ►( **General Instructions**

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

#### Purpose of Form

Sign

Here

A person who is required to file an information return with the IRS must obtain 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 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 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.

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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An Individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United
- An estate (other than a foreign estate), or

/ Date ▶

· A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity,