



Professional Services Agreement

Federal ID No: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZC \_\_\_\_\_

Type of Professional Services Rendered: \_\_\_\_\_

Amount Due: \$ \_\_\_\_\_ Date of Services From: \_\_\_\_\_ To: \_\_\_\_\_

Budget Account No. \_\_\_\_\_

Check Requisition Vendor ID: \_\_\_\_\_

Date Check Needed: Next Check Run Check Total: \$ \_\_\_\_\_

Will Call for Check: Please call x  Yes  No Mail Check:  Yes  No

Payee Signature \_\_\_\_\_ Date \_\_\_\_\_ Division Dean/Director \_\_\_\_\_ Date \_\_\_\_\_

Vice President / Provost \_\_\_\_\_ Date \_\_\_\_\_ CFO and VP for Finance & Administration \_\_\_\_\_ Date \_\_\_\_\_  
Lenora Chapman

Form **W-9**  
(Rev. January 2011)  
Department of the Treasury  
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return) \_\_\_\_\_  
Business name/disregarded entity name, if different from above \_\_\_\_\_  
Check appropriate box for federal tax classification (required):  Individual/sole proprietor  C Corporation  S Corporation  Partnership  Trust/estate  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_  Exempt payee  
 Other (see instructions) ▶ \_\_\_\_\_  
Address (number, street, and apt. or suite no.) \_\_\_\_\_ Requester's name and address (optional) \_\_\_\_\_  
City, state, and ZIP code \_\_\_\_\_  
List account number(s) here (optional) \_\_\_\_\_

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line 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 *How to get a TIN* on page 3.

Social security number  
[ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ]

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  
[ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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).

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 4.

Sign Here Signature of U.S. person ▶ Date ▶

