

Supplier Maintenance Request Form

Any Supplier who needs to update any of their supplier information, should complete this form. The only fields required on the form are the Supplier/Payee Name, Tax Payer ID, Signature and Date. Only enter the information in the fields on this form that <u>should be</u> changed.

*Indicates <u>Required</u> field.

Section 1: General Information					
The supplier name entered in this section will appear issued payments and Purchase Orders.					
Supplier/ Payee Na	ame* WICT Virginia				
Tax Payer ID*	26-058	3554			
Supplier 'DBA'					
Who is your COX	Contact				
COX Contact's Phone #			COX Contact's Email		
			<u> </u>		
Is your firm Certifice Minority or Women owned?			Do you have your certification?	Yes No (If yes, please attach a copy of the certification)	
Section 2: Purchasir	ng/ PO Contact Info	rmation			
Certain invoices mus	t reference a valid l	Purchase (Order (PO) number.		
Insurance, Newsprin	t & Ink, Music Paym R & Public Relations	ents, Nations, Building	ntertainment, Rent, Taxes, onal Dues, Charitable Con & Security, Utilities, Profe		
Name	Sarah Fromme				
Phone #	5409843273				
Fax #					
Email Address	sarah.fromme@	emp.she	entel.com		



Supplier Maintenance Request Form

Section 3: Payment Information

	thod is ACH (Automated Clea nail is sent when payment is is		t Deposit to a c	hecking account. A			
Do you accept Credit Card?	☐ Yes ■ No						
Bank Name	Wells Fargo						
Bank Routing #	121000248						
Bank Account #	2050000506659						
Remittance Email Address	sarah.fromme@emp.shentel.com						
outside the U.S. If ou institution in another	ocessing requirements for ele ir payments are being forward country, please check here	ded from a U.S. fir					
REMIT TO ADDRES Address Line 1	s <u>s</u> 500 Shentel Way						
Address Line 2							
City	Edinburg	State	VA				
Postal Code	22824	Country					
ACCOUNTS RECEIVENAME Phone	VABLE/ BILLING CONTACT Sarah Fromme 5409843273	:					
Email Address	sarah.fromme@emp.shentel.com	Business Type	Not for prof	fit corporation			
Signature* Sarah A. Fro	7. A. Fromme omme (Nov 2, 2017)			№ *2, 2017			
FOR OFFICE USE Date Complete	<u>ONLY</u>						

Form (Rev. December 2014)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

Internal	neverlue Service						
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.						
	Women in Cable Telecommunications - Virginia Chapter						
ge 2.	Business name/disregarded entity name, if different from above WICT Virginia Chapter						
Print or type Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	Trust/estate cer	Exemptions (codes apply only to rtain entities, not individuals; see structions on page 3): empt payee code (if any)				
Ę Ę	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)		emption from FATCA reporting				
Print or type Instructions	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the the tax classification of the single-member owner.	ilile above ioi	de (if any)				
P.	Other (see instructions) ► Not for profit corporation		plies to accounts maintained outside the U.S.)				
ĕ		juester's name and a	address (optional)				
Špe	500 Shentel Way						
See	6 City, state, and ZIP code						
Ø	Edinburg, VA 22824						
	7 List account number(s) here (optional)						
Par	Taxpayer Identification Number (TIN)						
	rour TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid	Social securit	number				
backu reside entitie	o withholding. For individuals, this is generally your social security number (SSN). However, for a stallen, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other s, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>						
	page 3.	Or Employer ider	ntification number				
	f the account is in more than one name, see the instructions for line 1 and the chart on page 4 fo nes on whose number to enter.		0583554				
Par	II Certification						
Under	penalties of perjury, I certify that:						
1. Th	number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on this form is my correct taxpayer identification number (or I am waiting for a number shown on the correct taxpayer identification number shown on the correct taxpayer identification number (or I am waiting for a number shown on the correct taxpayer identification number	umber to be issue	d to me); and				
Se	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I havice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dionger subject to backup withholding; and						
3. I a	n a U.S. citizen or other U.S. person (defined below); and						
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is	correct.					
becau interes genera	cation instructions. You must cross out item 2 above if you have been notified by the IRS that y se you have failed to report all interest and dividends on your tax return. For real estate transactic t paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an ally, payments other than interest and dividends, you are not required to sign the certification, but tions on page 3.	ons, item 2 does n individual retirem	not apply. For mortgage nent arrangement (IRA), and				
Sign Here	Signature of Sarah A. Fromme U.S. person ► Sarah A. Fromme (Nov 2, 2017) Date ►	Nov 2, 2	2017				

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.

WICT Virginia Chapter 500 Shentel Way

Edinburg, VA 22824

Women in Cable

Telecommunications

due upon receipt

Virginia

DATE: 3/2/2017

DUE DATE:

INVOICE #: WICTVASponsor2017-5

Cox Communications Virginia 1341 Crossways Blvd. Chesapeake, VA 23320

INVOICE

DESCRIPTION	AMOUNT
WICT VA Platinum Sponsorship - 2017	\$3,000
TOTAL DUE	\$ 3,000.00

If you have any questions concerning this invoice, contact: Sarah Fromme - 540-984-3273 or sarah.fromme@emp.shentel.com

Please remit to:
WICT Virginia Chapter
ATTN: Sarah Fromme
500 Shentel Way
Edinburg, VA 22824

WICT Virginia Chapter is a non-profit organization as defined by Section 501(c)(3) of the IRS Code. Donations to the WICT Virginia Chapter are tax deductible to the full extent allowed by law. Please consult your tax advisor.

The WICT Virginia Chapter's Tax ID number: 26-0583554.