

## **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 Info	ormation						
The supplier name ente	red in this section will app	pear issued payments a	nd Purchase Orders.				
Supplier/ Payee Name	me* WICT Virginia						
Tax Payer ID*	26-0583554	26-0583554					
Supplier 'DBA'							
Who is your COX Cor	ntact						
COX Contact's Phone	e #	COX Contact's Email					
Is your firm Certified Minority or Women owned?	as Yes No	Do you have your certification?	☐ Yes ☐ No  (If yes, please attach a copy of the certification)				
Section 2: Purchasing/	PO Contact Information						
Certain invoices must re	eference a valid Purchase	e Order (PO) number.					
Insurance, Newsprint &	Ink, Music Payments, Na Public Relations, Buildir	ational Dues, Charitable	xes, Copyright, Regulatory & Contributions, Film Payments, Professional Services, Accounting				
Name							
Phone #							
Fax #							
Email Address							



## Supplier Maintenance Request Form

### Section 3: Payment Information

Primary payment met remittance advice em		ted Clearing House)/Direct Dep nent is issued.	osit to a checking account. A
Do you accept Credit Card?	☐ Yes ☐ No		
Bank Name			
Bank Routing #			
Bank Account #			
Remittance Email Address		_	
	r payments are being	g forwarded from a U.S. financi	are sent to a financial institution lal institution to a financial
REMIT TO ADDRES	<u>S</u>		
Address Line 1			
Address Line 2			
City		State	
Postal Code		Country	
ACCOUNTS RECEIV	/ABLE/ BILLING CO	<u>NTACT</u>	
Phone			
Email Address		Business Type	
Signature* Sarah From	FROMME nme (Aug 29, 2016)		<b>Ratg</b> *29, 2016
FOR OFFICE USE  Date Complete	<u>ONL Y</u>		



# Request for Taxpayer Identification Number and Certification

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

IIILEITIAI	nevertue 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, INC VIRGINIA CHAPTER						
ige 2.	2 Business name/disregarded entity name, if different from above						
Print or type Specific Instructions on page	3 Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:  Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)					
후호	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners	.,	Exemption from FATCA reporting				
Print or type	<b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box is the tax classification of the single-member owner.	code (if any)					
무 그	Other (see instructions) ► NOT FOR PROFIT CORPORATION	1 =	(Applies to accounts maintained outside the U.S.)				
Ğ	5 Address (number, street, and apt. or suite no.)	Requester's name	e and address (optional)				
be	1154 Shenandoah Village Drive						
See (	6 City, state, and ZIP code						
ű	Waynesboro, VA 22980						
	7 List account number(s) here (optional)						
Par	Taxpayer Identification Number (TIN)						
backu reside entities	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avec withholding. For individuals, this is generally your social security number (SSN). However, 1 at alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For others, it is your employer identification number (EIN). If you do not have a number, see <i>How to get</i> page 3.	for a	ecurity number				
	If the account is in more than one name, see the instructions for line 1 and the chart on page nes on whose number to enter.	• 4 for <b>Employ</b> • <b>26</b>	er identification number - 0583554				
Part	II Certification	1 1					
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	r a number to be	issued to me); and				
Ser	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (but it is a subject to backup withholding as a result of a failure to report all interest onger subject to backup withholding; and						
3. I ar	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 reportir	ng is correct.					
becausinteres genera instruc	cation instructions. You must cross out item 2 above if you have been notified by the IRS to see you have failed to report all interest and dividends on your tax return. For real estate transet paid, acquisition or abandonment of secured property, cancellation of debt, contributions tally, payments other than interest and dividends, you are not required to sign the certification tions on page 3.	actions, item 2 d to an individual re	oes not apply. For mortgage stirement arrangement (IRA), and				
Sign	Signature of Sarah Fromme	<sub>ate</sub> Aug 2	29 2016				
Here	U.S. person ► Sarah Fromme (Aug 29, 2016)	ate , (ag 2					

### **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



Virginia

DATE: INVOICE #: April 13, 2016 WICTVASponsor2016-5

DUE DATE:

due upon receipt

Emmalamen Jessica. Dawley

Cox Communications - Virginia 1341 Crossways Blvd. Chesapeake, VA 23320

#### INVOICE

DESCRIPTION	A	MOUNT	
VICT VA Platinum Sponsorship - 2016		\$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.

Signature:

Email: