



STATE OF ALABAMA
REQUEST FOR TAXPAYER IDENTIFICATION NUMBER
STATE COMPTROLLER'S OFFICE

INSTRUCTIONS: In order to receive payment by the State of Alabama, a correct tax identification number, and address must be on our files. Payments will be or were made to you by an agency or department of the State of Alabama. To insure that accurate tax information is reported on Form 1099 for Federal income tax purposes, please:

- 1. In PART 1 below provide your Tax Identification Number and check FEIN or SSN. Also provide name and address to which payment should be sent.
2. Circle the business designation that identifies your type of trade or business in PART 2.
3. Return this form as soon as possible to:

DEPARTMENT OF FINANCE
100 NORTH UNION STREET SUITE 274
MONTGOMERY, ALABAMA 36130

PART 1 - TAXPAYER IDENTIFICATION NUMBER, NAME, AND ADDRESS

Identification Number _____ (must be nine digits)

Check one _____ Federal Employer Identification Number (FEIN)
_____ Social Security Number (SSN) (Print Name used for your Federal income reporting on the first line and your business name on the second line.)

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PART 2 - BUSINESS DESIGNATION Circle the designation that identifies your type of trade or business.

- 1. CORPORATION OR PROFESSIONAL CORPORATION (A corporation formed under the laws of any state within the United States)
2. NOT FOR PROFIT CORPORATION (Section 501(c) (3))
3. PROFESSIONAL ASSOCIATION
4. PARTNERSHIP, JOINT VENTURE, ESTATE OR TRUST
5. SOLE PROPRIETORSHIP OR SELF-EMPLOYED (Identification number must be Social Security Number)
6. NONCORPORATION RENTAL AGENCY
7. GOVERNMENTAL ENTITY (City, County, State or U. S. Government)
8. FOREIGN CORPORATION OR FOREIGN NATIONAL OR OTHER FOREIGN ENTITY (A Corporation or other foreign entity formed under the laws of a country other than the United States or an individual temporarily in the United States who pays taxes as a citizen other than the United States)

NOTE: If several state agencies make payment to your business, it is possible that you have received more than one of these forms. If you have already mailed this information, please disregard this request. Failure to complete and return this form may subject you to backup withholding in the amount of 31% of future payments pursuant to Section 3406, Internal Revenue Code.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS REQUEST AND TO THE BEST OF MY KNOWLEDGE: AND BELIEF, IT IS TRUE, CORRECT AND COMPLETE.

SIGNATURE

TITLE

TELEPHONE NUMBER

PRINTED NAME

DATE

PLEASE INCLUDE FEDERAL IDENTIFICATION NUMBER ON ALL INVOICES