

To: Town Vendors

The Town of Sullivan needs to certify your status on Form 1099 for the Internal Revenue Service. I appreciate your cooperation and request that you supply us with this information by completing the lower section of this letter and attach form W-9, request for Taxpayer Identification Number and Certification. Kindly return both forms to the address or fax number above.

1) Type of Business entity (please check one)

Individual\_\_\_\_\_

Partnership\_\_\_\_\_

Corporation \_\_\_\_\_

Sole Proprietor \_\_\_\_\_

Governmental Organization\_\_\_\_\_

Non -Profit Organization \_\_\_\_\_

Other (list type) \_\_\_\_\_

2) Employer Identification or Tax Identification Number of your business

Entity listed above: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_