

# Thurston County Vendor Information

Auditor - Financial Services  
2000 Lakeridge Drive S.W.  
Olympia WA 98502-6090  
(360) 786-5402  
FAX (360) 357-2481

## Vendor Instructions

1. Use this form <b>in place of Required IRS form W-9.</b>		Or FAX#	
2. Please PRINT LEGIBLY or TYPE the information, except for signatures.		Name & Department of Requestor:	
3. Business/Individual NAME and ADDRESS must be <u>exactly</u> the same as used for Federal Tax reporting purposes.			
4. Faxes are acceptable.			
5. Payment will not be made until this properly completed form is received.		Please PRINT LEGIBLY or TYPE	
Line 1: Name (If joint names, list first and circle the name of the person or entity whose TIN you are providing in the space below)			
Line 2: Business Name (Sole Proprietor enter your individual name on Line 1)			
Line 3: Payment Address - Street Number, Apartment Number, Mail-Stop Number, etc. (Address where check will be mailed)			
Line 4: Payment Address - City - State - Zip (Address where check will be mailed)			
Line 5: Business Address (if different) - Street Number, Apartment Number, etc.			
Line 6: Business Address (if different) City - State - Zip			
Line 7: Phone Number (Include Area Code)	(      )		
Line 8: FAX Number	(      )		
Line 9: UBI Number (Washington Business Only)	Yes / No		Line 9: If you answered Yes for UBI Number - record that number here
Line 10: Federal Taxpayer Identification Number	Employer Identification Number      OR      Social Security Number		
Line 11: Type of Business - <b>How you are filed with the IRS (Circle One)</b>	Individual      Corporation      Government Sole Proprietorship      Medical Corporation      Non-Profit Corporation Partnership      Attorney (Incorporated)      Other: (Explain Below)		
	Line 12: Explanation of Other:		
Line 13: Name/Title of Person Completing the Form			
Under penalty of perjury, I certify that the number shown on this statement is the correct taxpayer identification number			
Signature of Person Completing the Form      Date			
<b>(For Financial Services Use Only)</b>			
Comments	Data Entry Done By	Date	Vendor Number