

**MORGAN COUNTY COMMISSION
INVITATION TO BID
BID INVITATION NUMBER: 22-22
Janitorial Supplies**

Morgan County Commission is soliciting sealed bids for the items listed above. Bids will be received by the Morgan County Commission at the Morgan County Courthouse, Commission Office, 5TH Floor, 302 Lee Street, Decatur, Alabama 35602, until

Monday, September 26, 2022 at 9:00 a.m. C.D.T.

Bids will be opened in the County Commission Chambers at the above stated time and date. Time is of the essence in submitting bids and only sealed bids received in the Commission office by the time listed above shall be opened and considered. Bidders and other interested individuals are invited to attend the bid opening.

Prospective bidders are instructed to read the General Terms and Conditions and Bid Specifications very carefully. Bid addendums will be provided to all bidders, if necessary. Bids must be made in compliance with the guidelines in the sections referred to herein and ***each page initialed by the bidder representative to denote understanding of such compliance and returned with the submitted bid.***

Bid envelopes should be sealed and marked as follows:

**Bid Invitation Number 22-22
Janitorial Supplies
September 26, 2022**

Bids may be mailed to Morgan County Commission, P.O. Box 668, Decatur, AL 35602.

If there are any questions about bid procedures, please contact Jessica Smith at 256.351.4732 or jsmith@morgancounty-al.gov

Bidder Initials: _____

Morgan County Commission **General Terms and Conditions**

- All bids must be typed or hand-written in ink on the attached Bid Proposal Form. Please place the Bid Proposal Form in front of all other documents included in the bid packet. Bids submitted in pencil and bids not submitted on the Bid Proposal Form will not be considered. All corrections shall be initialed and dated by the bidder representative. Bids that are submitted without being signed will automatically be rejected.
- Bid envelopes must be sealed and must indicate clearly the appropriate bid number, bid item, and bid opening date, as indicated on the cover sheet of the bid packet. Bids by Facsimiles and emails will not be accepted. The County is not responsible for delays occasioned by the U.S. Postal Service, the internal mail delivery system of the County, or any other means of delivery employed by the bidder. Similarly, the County is not responsible for, and will not open, any bid responses which are received later than the date and time indicated above. Late bid responses will be retained in the bid file, unopened.
- The Commission provides equal opportunities for all businesses and does not discriminate against any vendor regardless of race, sex, creed, age, disability, national origin or religion in consideration for an award. Bidders must abide by the provision of the American with Disabilities Act of 1990 and assure that in connection with the performance of work under this agreement that they are an equal opportunity employer and do not discriminate on the basis of race, sex, creed, age, disability, national origin or religion.
- All bidders must comply with applicable sections of the Alabama Competitive Bid Law, Code of Alabama, 1975.
- **All bid amounts shall be submitted on the attached Bid Proposal Form.** Prices quoted shall be delivered prices, exclusive of all federal or state excise, sales, and manufacturer's taxes. The Commission will assume no transportation or handling charges other than specified in the bid.
- A completed W-9 should be included with your bid package.
- A completed affidavit of compliance with E-Verify should be included with your bid package.
- The Morgan County Commission reserves the right to cancel the contract with a 30 day written notice to the contractor if the performance of the service is unsatisfactory.
- These specifications and acceptance hereof shall constitute exclusively and entirely the agreement for the service as described within.
- The attached specifications are being provided to potential bidders as guidelines, which describe the type and quality of equipment, supply, and/or service the Commission is seeking to purchase.

Bidder Initials: _____

- These specifications and Attachment A constitute the contract between the awarded vendor and the Morgan County Commission.
- By signing this contract, the contracting parties affirm, for the duration of the agreement, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a contracting party found to be in violation of this provision shall be deemed in breach of the agreement and shall be responsible for all damages resulting therefrom.
- By signing this contract, grant, or other agreement, the contracting parties affirm, for the duration of the agreement, that such contractor is not currently engaged in, and an agreement that the contractor will not engage in, the boycott of a person or an entity based in or doing business with a jurisdiction with which Alabama can enjoy open trade.
- All bids will be awarded to the lowest responsive and responsible bidder. This determination may involve all or some of the following factors: price, conformity to specifications, previous performance, facilities and equipment, availability of repair parts, experience, delivery promise, terms of payments, compatibility as required, other costs and other objective and accountable factors which are reasonable. The County has established a local preference zone within the boundaries of Morgan County. The County may award the contract to a responsible bidder whose bid is no more than 10% greater than the bid of a foreign entity if the bidder has a place of business within the local preference zone. The Commission reserves the right to accept or reject any or all items covered in the request, or any portion(s) thereof, waive formalities, re-advertise and/or take such other steps deemed necessary and in the best interest of the Commission. Bidders may be disqualified and bid proposals may be rejected for any of (but not limited to) the following causes:
 - Failure to use the bid forms furnished by the Commission
 - Lack of signature by an authorized representative on the Bid Proposal Form.
 - Failure to properly complete the bid form.

Term: The bid shall be valid for a period of October 1, 2022 through September 30, 2023, with the option to renew for two (2) additional one (1) year periods at the same pricing.

Bidder Initials: _____

**MORGAN COUNTY COMMISSION
INVITATION TO BID: 22-22
JANITORIAL SUPPLIES**

Minimum Bid Specifications

Morgan County Commission is soliciting bids for janitorial supplies for various County Departments. The winning bidder must be able to provide sales support and customer service.

The items listed for pricing in Attachment A of this bid are the most frequently ordered products. This list is not all inclusive of the items that will be purchased and may change as the needs of the County change. No guarantee is made to purchase any amount of product(s) from any bidder as a result of any contract awarded on the basis of this bid.

All items listed on Attachment A must be priced in order for the bid to be considered. All prices submitted on the bid form will be in effect for the period the bid award is in effect.

Bidder must note any products or quantities that differ from the listing in Attachment A. Please provide additional documentation on these items.

FEES

If the performance of a product is not satisfactory, the vendor representative shall be notified and shall exchange the product at no cost within ten (10) working days. Failure to respond in good faith may result in termination of the contract. There shall be no restocking fees.

MINIMUM ORDER AND BACKORDERS

No minimum order required. Backorders are not permitted. All orders should be filled and delivered in a timely manner when customer places order.

DELIVERY

A delivery schedule shall be established at a minimum of weekly for all Morgan County departments.

TAXES

Morgan County is a tax- exempt entity which exempts all state and local sales taxes.

Bidder Initials: _____

CONTRACT PERIOD AND RENEWAL

The term of the contract will be for one year for the period beginning October 1, 2022 through September 30, 2023. Morgan County may, at its option, renew the term of this contract up to a maximum of two additional years, one year at a time. The awarded vendor shall be notified in writing by Morgan County of its intention to extend the contract term.

TERMINATION OF CONTRACT

Morgan County, may, by a 30-day written notice, terminate this contract, in whole or in part if the vendor fails to perform adequately the services, terms or conditions as proposed in their response to this bid.

QUESTIONS

Please direct any questions or concerns about the specifications to Jessica Smith at (256)351-4732 or jsmith@morgancounty-al.gov

Bidder Initials: _____

ATTACHMENT A: Morgan County Commission

Any product denoted with * (There can be no substitutions.)

JANITORIAL SUPPLIES

CLEANERS

PRODUCT	PACKAGE SIZE	PRICE
AMMONIA	1/2 Gallon/8 per case	_____
BRASSO	8 oz. cans/8 per case	_____
*CLOROX	121oz/3 per case	_____
BETCO REST STOP DISINFECTANT RESTROOM CLEANER	Gallon/4 per case	_____
BETCO REST STOP DISINFECTANT RESTROOM CLEANER	Quart/6 per case	_____
*FORMULA 409	Gallon/4 per case	_____
FURNITURE POLISH	16 oz. cans/12 per case	_____
GERMICIDAL SPRAY & WIPE	18 oz. cans/12 per case	_____
*JOY DISH DETERGENT	38 oz. bottles/8 per case	_____
*DAWN DISH DETERGENT	38 oz. bottles/8 per case	_____
LAUNDRY DETERGENT (Tide)	9 lb. Box	_____
*OSTRICH FEATHER DUSTER	Individually	_____
*PINE-SOL	Gallon/3 per case	_____
STAINLESS STEEL CLEANER	16 oz. cans /12 per case	_____
VINEGAR	Gallon/4 per case	_____
*MAXIM SPARKLE GLASS CLEANER	Gallon each	_____
*WINDEX AEROSOL GLASS CLEANER	20 oz. cans/12 per case	_____
*WINDEX GLASS CLEANER	Gallon/4 per case	_____
CONCENTRATED ULTRA DEGREASER	5 Gallon Container	_____
MR. CLEAN MAGIC ERASER	24 per case	_____
DIVERSEY STRIDE CITRUS NEUTRAL CLEANER	Gallon/4 per case	_____

CUPS

PRODUCT	PACKAGE SIZE	PRICE
5 oz. PLASTIC CUPS	1,000 per case	_____
6 oz. FOAM CUPS	1,000 per case	_____
12 oz. FOAM CUPS	1,000 per case	_____
16 oz. FOAM CUPS	1,000 per case	_____

SPONGES

PRODUCT	PACKAGE SIZE	PRICE
M-4 (7 ½" x 4 3/8" x 2 1/16")	24 per case	_____
NYLON SCOURING PAD (6' X 9")	20 per case	_____
SCRUB 74C (3 5/8" x 6 ¼')	20 per case	_____

Bidder's Initials: _____

FLOOR CARE PRODUCTS

PRODUCT	PACKAGE SIZE	PRICE
BETCO EASY TASK	1 Gallon/4 per case	_____
BASE BOARD STRIPPER	18 oz. cans/12 per case	_____
BROOMS (Lobby)(30 inches)	Individually	_____
BROOMS (WAREHOUSE) (56 inches)	Individually	_____
*STRIDE FLORAL FLOOR CLEANER	5 gallon container	_____
MOP HEAD (32 oz. clamp type rayon)	12 per case	_____
MOP HEAD (24 oz. clamp type cotton)	12 per case	_____
MOP HANDLES (clamp type)	Individually	_____
HEAVY DUTY STRIPPER	5 gallon container	_____
25% SOLID FLOOR FINISH	5 gallon container	_____
LOBBY DUST PAN	Individually	_____
BIO-ENZYMATIC SPOTTER 32 OZ/	12 per case	_____
XXXTRACTOR CARPET EXTRACTION	1 Gallon/4 per case	_____
BETCO EXTREME FLOOR STRIPPER	5 Gallon Pail	_____
AMERICO 101 HEAVY DUTY BROWN OCTOPUS PAD	20 per case	_____

PAPER PRODUCTS

PRODUCT	PACKAGE SIZE	PRICE
FLAT C-FOLD TOWELS (13X10)	16 Bundles per case	_____
ROLL PAPER TOWELS (BROWN) 8"x800'	6 Rolls per case	_____
HOUSE HOLD ROLL TOWELS	30 Rolls per case	_____
PRESTO WIPES (#2506)	By the case lot	_____
*KC PREMIERE (13964 ROLL TOWELS)	20 Rolls per case	_____
*SCRIM REINFORCED WIPER, BLUE	275' Roll/ 6 Rolls per case	_____

RESTROOM SUPPLIES

PRODUCT	PACKAGE SIZE	PRICE
GOJO NATURAL ORANGE(0955)	1 Gallon Pump Container	_____
*GOJO 1912-02 LTX PINK HAND SOAP	1200 ml container/2 per case	_____
HAND SOAP REFILL	Gallon/4 per case	_____
TOILET TISSUE	500 2-ply sheets/96 per case	_____
TOILET TISSUE (JR. JUMBO 2-PLY)	1,000 per roll/12 per case	_____
URINAL SCREENS	12 per case	_____
FEMININE NAPKINS (#4 VENDING)	250 per case	_____
TAMPON (VENDING PACKAGE)	500 per case	_____
ANTIBACTERIAL PUMP SOAP	8 oz./12 per case	_____
ANTIBACTERIAL HAND SOAP	Gallon/4 per case	_____
LARGE TOILET TISSUE DISPENSERS	Individually	_____
*ANT1L REFRESH (antibacterial soap)	6 -1 liter bottles/ per case	_____

Bidder's Initials: _____

BUFFING PADS

PRODUCT	PACKAGE SIZE	PRICE
BLACK 20"	5 per case	_____
BLACK 22"	5 per case	_____
RED 21"	5 per case	_____
WHITE 21"	5 per case	_____
NATURAL HAIR BLEND 21"	5 per case	_____

TRASH CAN LINERS

SAMPLES MUST BE SUBMITTED WITH BID AND LABELED ON ALL LINERS LISTED

PRODUCT	PACKAGE SIZE	PRICE
16"X14"X36" (.60 mil)	250 per case	_____
15"X9"X23" (.45 mil)	1000 per case	_____
33 GALLON (minimum .9)	250 per case	_____
55 GALLON (MINIMUM 1.3)	100 per case	_____

GLOVES

PRODUCT	PACKAGE SIZE	PRICE
FOOD SERVICE (POLY DISPOSABLE)	100 per box/10 per case	_____
LATEX	12 per case	_____
VINYL DISPOSABLE (minimum 4 mil)	100 per box/10 per case	_____
NITRILE (minimum 4 mil)	100 per box/10 per case	_____

DEODORIZERS

PRODUCT	PACKAGE SIZE	PRICE
DRAIN (LIQUID ALIVE ENZYMES)	Quart bottles/12 per case	_____
MOUNTAIN FRESH	Quart bottles/12 per case	_____
CHASE AIR FRESHENER	15 oz. Cans/12 per case	_____
BIG D ENZYM D DIGESTANT	Quart bottles/12 per case	_____
*LYSOL DISINFECTANT	19 oz. Cans/12 per case	_____
SPRAY DISINFECTANT	15 to 20 oz cans/12 per case	_____

MISCELLANEOUS

PRODUCT	PACKAGE SIZE	PRICE
OIL ABSORBANT (OIL DRY)	40 LB. Bags	_____
WHITE CLOTH RAGS	25 LB. Box	_____
QUART ZIPLOCK BAGS	500 per case	_____
GALLON ZIPLOCK BAGS	250 per case	_____
UMBRELLA BAGS (regular)	500 per case	_____
UNBRELLA Bags(mini) 6.5 x 20	500 per case	_____
BEARD COVERS	100 per container	_____
DISINFECTING WIPES (7"x8")	80 per package/12 per case	_____
*PURELL HAND SANITIZER 9652-12	8oz pump/12 per case	_____

Bidder's Initials: _____

JAIL SUPPLIES

PRODUCT	PACKAGE SIZE	PRICE
21" HAIR NETS	100 per bag	_____
DUAL ACTION INSECT KILLER	16 oz. cans/12 per case	_____
SPOONS (WRAPPED)	1,000 per case	_____
GRILL BRICKS	12 per case	_____
24"X5" DUST MOP REFILL	Individually	_____
36"X5" DUST MOP REFILL	Individually	_____
48"X5" DUST MOP REFILL	Individually	_____
152P TOLIET BOWL BRUSH	Individually	_____
WHITE HAND HELD SCRUB BRUSH	Individually	_____
STAINLESS STEEL SCOURING PAD	Individually	_____
6 lb. BROWN GROCERY BAGS	500 per bundle	_____
6"X6" WAX SANDWICH BAGS	1,000 per box	_____
HEAVY 3 COMP. (CARRY OUT TRAYS)	200 per case	_____
18" FOOD FILM (PLASTIC WRAP)	2,000 ft. roll	_____
18" HEAVY DUTY ALUMINUM FOIL	500 ft. roll	_____
24" X 5"DUST MOP FRAME	Individually	_____
36" X 5"DUST MOP FRAME	Individually	_____
48" X 5"DUST MOP FRAME	Individually	_____
SWIVEL SNAP DUST MOP HANDLE	Individually	_____
32 OZ. SPRAY BOTTLE Indiv	Individually	_____
SPRAY PRO TRIGGER SPRAYER, 9 ¼	Individually	_____
WASTEBASKET, 41 QT. Indiv	Individually	_____
32 GAL ROUND CONTAINER,GREY	Individually	_____
55 GAL ROUND CONTAINER,GREY	Individually	_____
22" H.D. WATER WAND SQUEEGEE	Individually	_____
GOJO ADX-12 FOAM SOAP REFILLS	3/1250 ML.	_____
GOJO ADX-12 SOAP DISPENSERS	To be furnished by Vendor	_____
PURELL LTX-12 HAND SANITIZER DISPENSERS	To be furnished by Vendor	_____
PURELL LTX INSTANT HAND SANITIZER REFILLS	2/1200 ML	_____

TOTAL OF ALL PRODUCTS

This total should be the total of all products and should be on the bid proposal form.

Any exceptions should be noted on the bid!!! If the product you are bidding is not EXACTLY as listed, you must note any deviation or substitution.

Bidder's Initials: _____

**Morgan County Commission
BID PROPOSAL FORM
Bid Invitation Number 22-22
Janitorial Supplies**

Name of Your Company: _____

Street Address: _____

Billing Address: _____

City, State & Zip: _____

Contact Person & Phone: _____

Email address: _____

Total Cost: _____

Exceptions/Deviations/Substitutions: (attach additional sheets if necessary)

Bidder Representative Signature

Date

Bidder Initials: _____

Notice: As a condition of a bid, contracts or grant with Morgan County, compliance with the requirements of the Beason-Hammon Alabama Taxpayer and Citizen Protection Act must be provided. Please enter the name of your company and your name and complete the affidavit below. Your signature must be notarized.

BUSINESS ENTITY: _____

APPLICANT NAME: _____

E-VERIFY AFFIDAVIT

I _____ (name), on behalf of _____ (business entity), and with lawful authority to act in its behalf, hereby execute this affidavit on behalf of the business listed above and, by executing this affidavit, I verify that business' compliance with Section 31-13-9 of the Code of Alabama, 1975, stating affirmatively that it does not knowingly employ, hire for employment or continue to employ an unauthorized alien. Further, the business has registered with and is participating and will participate during the performance of this contract with Morgan County in the federal work authorization program known as "E-verify" web address <https://e-verify.uscis.gov/enroll>, operated by the United States Citizenship and Immigration Service Bureau of the United States Department of Homeland Security to verify information of newly hired employees pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603, in accordance with the applicable provisions of Alabama's Immigration Law. The undersigned further represents that, should the business employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to the contract with the County, it will secure from such subcontractor(s) verification of compliance with Section 31-13-9 of the Code of Alabama, 1975, in a form substantially similar to this affidavit. The Business further agrees to maintain records of such compliance and provide a copy of each said verification to the County.

E-Verify Employment Eligibility Verification User ID Number

Applicant Signature

Sworn to and subscribed before me this _____ day of _____, _____.

Notary

My Commission expires: _____

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later. Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Social security number</td> </tr> <tr> <td style="text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td></td> <td></td> </tr> </table> </td> </tr> <tr> <td style="text-align: center;">or</td> </tr> <tr> <td style="text-align: center;">Employer identification number</td> </tr> <tr> <td style="text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td></td> <td style="text-align: center;">-</td> <td></td> <td></td> </tr> </table> </td> </tr> </table>	Social security number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td></td> <td></td> </tr> </table>					-	-			or	Employer identification number	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td></td> <td style="text-align: center;">-</td> <td></td> <td></td> </tr> </table>						-		
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Part II Certification Under penalties of perjury, I certify that: <ol style="list-style-type: none"> The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and I am a U.S. citizen or other U.S. person (defined below); and The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.	
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Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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-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, later.