Constituent Priorities

Chairman, Rep. Alex Andrade

PLEASE MAKE CHECK(S) PAYABLE TO:

Constituent Priorities 2055 NW Diamond Creek Way Jensen Beach, FL 34957

QUESTIONS? CONTACT:

Rick Porter 407-849-1112 rick@politicalcapitalflorida.com

	_				
THIS	CON.	TRIRI	ITION	IIC.	FROM:

Signature

☐ Business (Name of business):	□ Individual (First & Last Name):
CONTRIBUTOR INFORMATION	
Contact Name: Prefix First _	Middle Last
Address	Home Phone
City	State Zip Work Phone
Type of Business (For Corporations)	
Cell Phone	Email
Employer	Occupation
CREDIT CARD CONTRIBUTIONS	
Credit Card: (Check One)	mostercard DISCOVER
This Card Is Used For:	☐ Personal If business, name of business
Card Number	Amount _\$
Expiration Date	CSC Cardholder Name

CONTRIBUTIONS ARE NOT DEDUCTIBLE FOR FEDERAL INCOME TAX PURPOSES.

_ Date _

Political advertisement paid for and approved by Constituent Priorities. 2055 NW Diamond Creek Way Jensen Beach, FL 34957.



Request for Taxpayer Identification Number and Certification

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

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

пистна	ıı nev	reflue Service											
Befor	e yo	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.											
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Constituent Priorities												
	2	Business name/disregarded entity name, if different from above.											
on page 3.	За	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals;						
on p	Individual/sole proprietor C corporation S corporation Partnership Trust/estate						see instructions on page 3						
e. ns			<u>_</u>		_	Exempt payee code (if any)							
Print or type. c <i>Instruction</i> s		Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate tox classification of its owner.				Exemption from Foreign Account Compliance Act (FATCA) reporting							
rint Ins		Other (see instructions) Political Organization			_	code (if any)							
Specifi	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions					(Applies to accounts maintained outside the United States.)							
See	5	Address (number, street, and apt. or suite no.). See instructions.			uester's name and address (optional)								
0)	2055 NW Diamond Creek Way												
	6	City, state, and ZIP code											
	Jei	nsen Beach, FL 34957											
	7	List account number(s) here (optional)											
Par	t I	Taxpayer Identification Number (TIN)											
		r TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	′ola ⊨	ocial	sec	urity r	numb	er	г				
		ithholding. For individuals, this is generally your social security number (SSN). However, the security number (SSN).	or a			_			_				
		lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	et a										
TIN, la	,		or			lala add	C 4					_	
Note:	If th	ne account is in more than one name, see the instructions for line 1. See also What Name		npio	yer □	identif	icati	on n	umb	er	_	=	
		o Give the Requester for guidelines on whose number to enter.	8	3	-	- 2	2	2	9	2	0	1	
Par	t II	Certification											
Jnde	r pei	nalties of periury. I certify that:											

- 1. 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
- 2. 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
- 3. I am 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 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.

Sign Signature of ebbis Millner Here Date U.S. person

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they