

# 请提供您的支票寄送地址

## 企业须知

在我们开具支票之前，需要您提供地址和税务申报信息。请填写并提交随附的金县替代版 W-9 表格。

- 1 **名称**  
您填写的名称需与发票上所列名称完全一致。  
如果使用“营业别称”(Doing Business As, 缩写为 DBA), 则必须在华盛顿州商业许可服务机构或等同机构注册。  
例如：“ABC Projects, Inc.”
- 2 **企业类型**  
此项指企业的法律组织形式。  
(请选择一项)
- 3 **企业注册信息**  
由华盛顿州税务局分配的 UBI 编号。  
(或是企业注册地所在州及相应注册编号)
- 4 **采购地点信息**  
您的实际地址。  
(不接受邮政信箱地址)
- 5 **汇款信息**  
支票应为您寄送到什么地址？
- 6 **税务申报名称**  
您在美国国税局 (IRS) 注册的企业名称。
- 7 **税务申报地址**  
您在美国国税局 (IRS) 注册的企业地址。
- 8 **纳税人识别号或社会保障号**  
IRS 分配给您的税务申报编号。  
仅需填写数字，请勿使用破折号。

## 金县替代版 W-9 表格范本

KING COUNTY SUBSTITUTE W-9	Request for Taxpayer Identification number and Certification	Give form to King County. Do not send to IRS.									
<b>1 Name (as shown on Invoice)</b> ABC PROJECTS, INC.											
<b>2 Business Type</b> <input type="checkbox"/> Association <input checked="" type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Disregarded Entity <input type="checkbox"/> Division <input type="checkbox"/> Government <input type="checkbox"/> Individual <input type="checkbox"/> Limited Liability Company: Enter tax classification (C=C-Corporation, S=S-Corporation, P=Partnership) <span style="border-bottom: 1px solid black; display: inline-block; width: 50px;"></span> <input type="checkbox"/> Non Profit <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust/Estate											
<b>3 Business Registration Information</b> Enter where you are registered to do business and the corresponding State Registration Number State: WA    Registration Number: 601-234-567											
<b>4 Purchasing Location Information</b> Physical Address 400 5th AVENUE											
City, State, and Zip SEATTLE, WA 98121											
<b>5 Remittance Information</b> Remit Address (if different than above) PO BOX 754321											
City, State, and Zip CHICAGO, IL 60601											
<b>6 Tax Reporting Name and Tax Identification Number or Social Security Number</b> Enter your Tax reporting Name and address. The Tax Identification number provided must match the name given on the "Tax Reporting Name" line. For individuals, this is your social security number (SSN). Tax Reporting Name XYZ PROJECT SERVICES INC											
Tax Reporting Address 1234 MAIN ST											
Tax Reporting City, State, and Zip SEATTLE, WA 98104											
Tax Identification Number, Employer Identification Number or Social Security Number (enter numbers only): <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td> </tr> </table>			1	2	3	4	5	6	7	8	9
1	2	3	4	5	6	7	8	9			
<b>8</b> Under penalties of perjury, I certify that: 1. The number shown on this form is my correct tax reporting name and identification number. 2. I am a U.S. citizen, U.S. person or U.S. Business Entity. 3. I am not subject to backup withholding due to failure to report interest and dividend income. 4. I am exempt from FATCA reporting.											
<b>Certification instructions.</b> If you are not a U.S. citizen, U.S. person or U.S. Business Entity, you must cross out item 2 above. You will need to provide a completed King County W9 form as well as a copy of your W-8.											
Sign Here <span style="border-bottom: 1px solid black; display: inline-block; width: 150px;"></span>											
Print Name of Signer		Date Signed									