

SUBSTITUTE IRS FORM W-9

**University of Louisville
Controller's Office
Louisville, KY 40292**

**Telephone (502) 852-2967
Fax (502) 852-8228**

USE THIS FORM ONLY IF YOU ARE A UNITED STATES CITIZEN

Application is: New

Updated information

ADDRESS INFORMATION

NAME: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TELEPHONE: () _____ FAX: () _____

REMITTANCE ADDRESS: (if different than above)

NAME: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TELEPHONE: () _____ FAX: () _____

SOCIAL SECURITY NO. _____

FEDERAL TAX ID NO. _____ (if business)

SIGNATURE OF INDIVIDUAL _____ (Required if 1099 transaction)

FOR U OF L DEPARTMENTAL USE:

Requisition Pending? Y _____ N _____ Requisition # (if known) _____

Dispersal Form Pending? Y _____ N _____

Goods/Services to be provided by this vendor: _____
