

## Instructions for completing W-9: Request for Taxpayer Identification Number and Certification form for Wellness Project purposes

- Please fill out the W-9 form **in its entirety.**
- On Lines 1, 5, and 6, please enter the program's name and address **as they appear on your tax forms.**
- On Line 2, please list **exactly to whom the mini-grant checks should be made out, as well as the exact address where the checks should be mailed. This information may be different than the name and address you use for your tax purposes but is important so that your checks go to the correct place!**
- The requester's name and address is as follows: **Tuscarora Intermediate Unit**
- IRS instructions are included for your reference.

Please submit completed form by fax, email, or mail to:

Cindy Wilson

Tuscarora Intermediate Unit CEWS

6395 SR 103 N, Building 58

Lewistown, PA 17044

[cjwilson@tiu11.org](mailto:cjwilson@tiu11.org)

Fax – (717) 248-8610 Attn: Cindy Wilson