

## UC HASTINGS COLLEGE OF THE LAW

College Use Only						
VENDOR #:						
	Net 30					
PMT TERMS:	Net 60					
	Due Upon Receipt					
VENDOR SET UP DATE & INITIALS:						

<b>C</b> .	UNIVERSITY OF CALIFORNIA (Substitute W-9 Form)			PMT TERMS: Net 60  Due Upon Receipt  VENDOR OFT HD DATE & INVIALOR		
	HASTINGS OLLEGE OF THE LAW			VENDOR SET UP DATE & INITIALS:		
1	INSTRUCTIONS: Complete all information on this form. Sign, date and return to the UC Hastings College of the Law address shown at the bottom of this page. Prompt return of this fully completed form will prevent delays when processing payments. Information provided in this form will be used by Hastings to prepare information returns (1099).  * Required fields  * Vendor's Legal Business Name					
	*Sole Proprietor- Name as shown on Tax Retu	rn (First, M Last)	E-Mail Address			
2	* Business Address		Remittance Address (if different)			
	* City, State, Zip Code		City, State, Zip Code			
	* TAX DENTIFICATION NUMBER (TIN) Note: Payment will not be processed without an accompanying taxpayer I.D. number.		Federal Employer Id	lentification Number (FEIN)		
	PARTNERSHIP	[	CORPORATION			
3	ESTATE OR TRUST	[	MEDICAL (e.g. dentis	stry, psychotherapy, chiropractic, etc.)		
	OTHER	[	LEGAL (e.g. attorney	services)		
	INDIVIDUAL OR SOLE PROPRIETOR					
	Type of Goods/Services provided to UC Hastin	ngs College of the Law:	Social Security num	ber		
4	GOODS		CONSULTANT			
	SERVICES		OTHER	OTHER		
	ATTORNEY					
Certification: Under penalties of perjury, 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).  (2) I am not subject to backup withholding because: (a) I am exempt form 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.  (3) I am a U.S. person (including a U.S. resident alien).						
	You must cross out items (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of under reporting interest or dividends on your tax return.					
6	Authorized Payee Representative's Name		Title			
	Signature		Telephone			
7	MAIL: UC HASTINGS COLLEGE OF THE LAW OFFICE OF FISCAL SERVICES ATTN: ACCOUNTS PAYABLE 200 MCALLISTER STREET SAN FRANCISCO, CA 94102	FAX: (415) 565-4698 Attn: Accounts Payable TEL: (415) 565-4748	Complete the E-0	Check authorization form and submit it to Room 111. If you have any questions, the of Fiscal Services at 415-565-4704 or suchastings.edu.		