



Event Code: \_\_\_

You can	count on me	e/us parti	icipating	at the follo	wing level:	
\$3,000 \$1000	<b>\$500</b>		<b>\$100</b>	OTHER	R	_
THIS CONTRIBUTION IS F	ROM:		PLEASE MAK	E CHECK(S) PAYA	BLE TO:	
☐ Business (Name of business):			"Blaise In 610 S. Bo	<sup>gn"</sup> 回 <b>表</b> 為回	]	
			Tampa, F		BLAISE	į
☐ Individual (First & Last Name):				Kayla Finney		j
				aiseforflorida.co seforFlorida.co		
The maximum personal or corporate co income tax purposes. The individual maseparate checks. Foreign nationals are accompanying checks must include don business), phone number(s) and email a	iking the contribut prohibited from c or's full name, str	tion must sign contributing un	the check. A less they ha	A husband and wive a green card.	fe must each sign Donor information	
CONTRIBUTOR INFORMATION	1					
Contact Name Prefix First _		Middle		Last		
						_
Address		Home Pi	none			-
City	_ State	Zip	Wor	k Phone		_
Type of Business ( For Corporations)						_
Cell Phone	Email					
Employer		Occupation				
		Cocapation				
CREDIT CARD CONTRIBUTION	IS					
Credit Card: (Check One)	A D mastercard	AMERICAN EXPRESS	□ DISC	VER <sup>®</sup>		
This Card Is Used For:   Business	□ Personal	If business,	, name of bu	siness		_
Card Number			Am	ount \$		
Expiration Date	CSC	Cardhold	er Name			
Signature			Date	e		

CONTRIBUTIONS ARE NOT DEDUCTIBLE FOR FEDERAL INCOME TAX PURPOSES. THE MAXIMUM CONTRIBUTION ALLOWED BY FLORIDA LAW IS \$3,000 PER INDIVIDUAL OR BUSINESS.

Paid by Blaise Ingoglia, Republican, for Chief Financial Officer.

(Rev. March 2024) Department of the Treasury Internal Revenue Service

## **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.

Befor	еу	bu begin. For guidance related to the purpose of Form W-9, see Purpose	se of Form, 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 busine entity's name on line 2.)								ess/	'disre	gard	ed			
Print or type. See Specific Instructions on page 3.	ВІ	aise Ingoglia for CFO												
	2	Business name/disregarded entity name, if different from above.												
	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.    Individual/sole proprietor						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any)  Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)							
	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.  Requester 610 S. Boulevard					ster's name and address (optional)								
	6	City, state, and ZIP code												
	Ta	mpa, FL 33606											,	
	7	List account number(s) here (optional)												
											_			
Pai	τI	Taxpayer Identification Number (TIN)			Soc	ial co	curity	numi	nor.					$\neg$
		rr TIN in the appropriate box. The TIN provided must match the name g			300	lai se		Tium.		Г		T	<del>-</del>	닉
		vithholding. For individuals, this is generally your social security number alien, sole proprietor, or disregarded entity, see the instructions for Part	25 50 (00)	or a			-			-				
		t is your employer identification number (EIN). If you do not have a num		t a	or					L				
TIN later					ploye	yer identification number								
<b>Note:</b> If the account is in more than one name, see the instructions for line 1. See also <i>What Name Number To Give the Requester</i> for guidelines on whose number to enter.		and	3	9	- 3	8	8	2	8	3	3			
Par	t II	Certification												_
Unde	r pe	nalties of perjury, I certify that:												
		mber shown on this form is my correct taxpayer identification number (												
Se	rvic	ot subject to backup withholding because (a) I am exempt from backup e (IRS) that I am subject to backup withholding as a result of a failure to ger subject to backup withholding; and	withholding, or (b) report all interest of	I have r or divide	not be ends,	een r or (c	otified ) the I	by t RS h	he Ir as no	tern	al R d m	e tha	nue at I a	ım
		U.S. citizen or other U.S. person (defined below); and												
		ATCA code(s) entered on this form (if any) indicating that I am exempt from												
becau acqui other	use sitio thai	tion instructions. You must cross out item 2 above if you have been notifi you have failed to report all interest and dividends on your tax return. For r n or abandonment of secured property, cancellation of debt, contributions n interest and dividends, you are not required to sign the certification, but you	eal estate transaction to an individual reti	ons, item irement	n 2 do arran	oes n geme	ot app ent (IR.	ly. Fo A), ar	or mo	rtga enera	ge ir ally,	ntere payr	st p	ts
Sigr Here	1 <del>2</del>	Signature of U.S. person	С	ate										
Ge	ne	eral Instructions	New line 3b has b											
		eferences are to the Internal Revenue Code unless otherwise for	oreign partners, ow another flow-thro	ners, or	bene	eficia	ries w	hen i	t pro	vides	s th	e Fo	rm \	
Futur		evelopments. For the latest information about developments	hange is intended t	o provid	de a	flow-	throug	h en	tity v	vith i	nfor	mati	on	ilio

## 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.

related to Form W-9 and its instructions, such as legislation enacted

after they were published, go to www.irs.gov/FormW9.

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