

Vesl ve

	You can d	ount on m	e/us pari	ticipating	at the followi	ng level:
\$1,000	\$500	\$250		\$100	OTHER _	
THIS CONTRI	BUTION IS F	ROM:		PLEASE MAK	KE CHECK(S) PAYABLE	TO:
□ Business (Nam		9800 4th S	nari for State House' st. N. Suite 200 ourg, FL 33702	B S B B B B B B B B B B B B B B B B B B		
☐ Individual (Firs	st & Last Name):			Contact: R	•	SCAN ME
The maximum perso income tax purposes separate checks. Fo accompanying check business), phone nur	s. The individual mak reign nationals are p s must include dond	king the contribu prohibited from o pr's full name, st	ition must sig contributing u	n the check. <i>I</i> Inless they ha	A husband and wife n ive a green card. Doi	nust each sign nor information
CONTRIBUTOR	INFORMATION					
Contact Name Prefix	x First		Middle		Last	
Address			Home I	Phone		
City		State	Zip	Wor	rk Phone	
Type of Business (Fo	r Corporations)					
Cell Phone		Email				
Employer			_ Occupation	ı		
CREDIT CARD C	ONTRIBUTION	S				
Credit Card: (Check C	One) 🗆 🗸	mastercard	AMERICAN EXPRESS	□ DISC	VER"	
This Card Is Used For	r: 🗆 Business	☐ Personal	If business	s, name of bu	siness	
Card Number				Am	ount \$	
Expiration Date		CSC	Cardhol	der Name		
Signature				Dat	e	

CONTRIBUTIONS ARE NOT DEDUCTIBLE FOR FEDERAL INCOME TAX PURPOSES. THE MAXIMUM CONTRIBUTION ALLOWED BY FLORIDA LAW IS \$1,000 PER INDIVIDUAL OR BUSINESS.

Paid by Ed Montanari, Republican, for State Representative.

Event Code: _____

Form **W-9**(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.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose 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 business/disregarded entity's name on line 2.)									ded						
	Εc	l Montanari Campaign													
	_	2 Business name/disregarded entity name, if different from above.													
on page 3.	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 C corporation S corporation Partnership Trust/estate							4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):							
Print or type. Specific Instructions on page		LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.						Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting							
rint Inst	Other (see instructions) 527 IRC Candidate Campaign							code (if any)							
P Specific	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. Reques 9800 4th Street North Suite 200					ster's name and address (optional)								
	6	City, state, and ZIP code													
	St	Petersburg, FL 33702													
	_	List account number(s) here (optional)			_										
Part I Taxpayer Identification Number (TIN)															
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social security number															
backu	p w	ithholding. For individuals, this is generally your social security number (SSN). However, f	or a		Γ	T				T					
reside	nt a	lien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other					-			-					
entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.				or											
					Employer identification number										
Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.				4	7	-	3	6	2	0	8 2	3			
Part II Certification															
Under	pe	nalties of perjury, I certify that:													
2. I am Sen	no vice	mber shown on this form is my correct taxpayer identification number (or I am waiting for it subject to backup withholding because (a) I am exempt from backup withholding, or (b) (IRS) that I am subject to backup withholding as a result of a failure to report all interest over subject to backup withholding; and	I have no	ot b	ee	n no	tified	bv th	e Ir	tern	al Rev	enue nat I a	am		
3. I am a U.S. citizen or other U.S. person (defined below); and															
		TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	g is corre	ect.											
Certifi becaus acquis	cat ise y	on instructions. You must cross out item 2 above if you have been notified by the IRS that you have failed to report all interest and dividends on your tax return. For real estate transaction or abandonment of secured property, cancellation of debt, contributions to an individual retinterest and dividends, you are not required to sign the certification, but you must provide you	ou are cu ons, item rement a	ırre 2 d ırrar	ntly loes	s not	apply	/. For	mo I. ae	rtga(ge inte	est p	ts		
Sign Here		Signature of	ate 3	1	2	V.	21) ;	34	F					
		** Company of the Com			_				_						

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This 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