



# CJA VENDOR FORM

VENDOR TYPE: (Please select one)

☐

ATTORNEY / FIRM

☐

CLIENT

☐

REPORTER

☐

SERVICE

(Choose subcategory) ---->>

**NO LONGER NEED THE SOCIAL SECURITY #**

SOCIAL SECURITY NUMBER : (PLEASE DISREGARD) (Mandatory even if affiliated with a firm and will be using an EIN)

NAME AND MAILING ADDRESS:

(Last name, first name, middle initial or middle name)

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PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Indicate below your choice of how payments should be reported to the IRS **PLEASE DISREGARD THIS SECTION**

☐

Under my social security number and name, as indicated above.

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To the firm with which I am affiliated. The firm's Taxpayer Identification Number (EIN), name and address are:

TAXPAYER IDENTIFICATION NUMBER (EIN): (PLEASE DISREGARD) **NO LONGER NEED THE EIN #**

FIRM NAME AND MAILING ADDRESS:

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**Under penalties of perjury, I certify that:**

- 1 The Taxpayer Identification Number (SS, TIN, or EIN) listed above is correct and assigned to the aforementioned name (or business name), and
- 2 I'm not subject to backup withholding because: (a) I'm exempt from backup withholding, or (b) I have not been notified by the 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, and
- 3 I am a U.S. citizen or other U.S. person (defined below).

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**Email Form**

\*\*\*Vendors are also required to complete a W-9 which can be found at: <http://mtd.uscourts.gov/forms-you-need-use>