Form W-9 (Rev. December 2014) Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

interna	Revenue Service						
Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.					
	2 Business name/disregarded entity name, if	different from above				11.3, 12.3, 13.4, 13.4, 1 .	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or Corporation Socorporation Partnership Trust/estate			10.00	Cell phone:		
	single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. Other (see instructions)			- FAV.	FAX:		
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	5 Address (number, street, and apt. or suite i				and address (optional) orse Breeders Association		
	701 FAST 6			LTIMORE PIKE SUITE E			
	CITY, STATE, and ZIP code			JARE PA 19348			
				610-444-1050 FAX: 610-444-1051			
	Email Address: Telephone:				710 444 103		_
Par							_
					curity number		
backup withholding. For individuals, this is generally your social security number (SSN). However, for a							٦
resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>					-		
TIN or	s, it is your employer identification numbers a page 3.	er (EIN). If you do not have a number, see How to get					_
					on number		
Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.				T T	On number		
For guidelines, refer to: http://www.irs.gov/pub/irs-pdf/fw9.pdf				-			
Part	II Certification						_
Under	penalties of perjury, I certify that:						_
1. The	number shown on this form is my correct	t taxpayer identification number (or I am waiting for	a number to be	e issued to me	e): and		
2. I ar Ser	n not subject to backup withholding beca	use: (a) I am exempt from backup withholding, or (b) hholding as a result of a failure to report all interest o) I have not be	en notified by	the Internal	Revenue ne that I an	n
3. I ar	n a U.S. citizen or other U.S. person (defi	ned below); and					
4. The	FATCA code(s) entered on this form (if ar	ny) indicating that I am exempt from FATCA reporting	g is correct.				
Certifi becau interes genera	cation instructions. You must cross out se you have failed to report all interest an it paid, acquisition or abandonment of se	item 2 above if you have been notified by the IRS the dividends on your tax return. For real estate transacured property, cancellation of debt, contributions to dends, you are not required to sign the certification,	at you are curr actions, item 2 o an individual	does not appl retirement arra	ly. For morto angement (II	gage RA), and	
Sign Here	Signature of U.S. person ▶	Da	te ▶				_
Here By Clie	U.S. person ►	aptcha, you acknowledged that you have digitally s	igned this W-9				

By Clicking "I Agree" button and filling in the Captcha, you acknowledged that you have digitally signed this W-9 form and agreed to the terms in the immediately succeeding paragraph. Electronic Submission of this W-9 form requires the use of a digital signature or equivalent. The Pennsylvania Electronic Submission Act, 73 P.S. § 2260.101, authorizes the Pennsylvania Department of Agriculture to accept digital signatures in place of manual signatures. Your electronic submission of this form has the same legal effect as your manual submission.

PHBA USE ONLY BELOW THIS LINE