



Government Entity Confirmation Form

- **If you are a Government Entity or operating under a Government Entity**
Copy and complete the information below on your organization letterhead, signed by an authorized representative.

| | |
|--------------|--|
| DATE: | |
|--------------|--|

GOVERNMENT ENTITY INFORMATION – Information as it appears on the tax id holder's Federal tax return

We confirm that we are operating under the local, state or federal government entity of:

| | |
|---|--|
| Name of Local, State, or Federal Government Entity: | |
| Address of Local, State, or Federal Government Entity: | |
| Organization Federal Tax ID#: | |

PAYEE ORGANIZATION INFORMATION

| | |
|----------------------------------|--|
| Organization Name: | |
| Organization Address: | |
| Organization Main Phone Number: | |
| Authorized Representative | |
| Name (print): | |
| Title: | |
| Phone Number: | |
| Fax Number: | |
| Email: | |
| Signature: | |