

## **Substitute W-9 Instructions**

- When you click the link provided, this page comes up.
- Enter your name and email address in the appropriate fields.
- Click "Begin Signing"

Please enter you to begin the sign	ir name and ing process.	email	
Your Role:			
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- The system will send an email to the email address provided with the Access Code needed. Open the email.
- Copy and paste the Access Code provided in the "Access Code" field and click the "Validate" button.

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	Copy and enter the validation code into the access page to continue signing. If you did not start signing Please DocuSign: FSU Substitute W9 Form, please contact support.	
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- Hit "Continue" if the form looks grayed out.
- Begin filling in the form. Fields with red boxes are required and must be completed.

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- Continue filling in the blocks until you get to the bottom.
- Click the "Sign" icon.

If you selected a classification that is certified by a Federal or State agency, please supply your certification number(s) and expiration dates for each certification and the agency or agenci name(s) that issued the certification with this application. To determine your Federal Small Business Size Standard, please access the US Small Business Administration's website: www.sba.gov/size_To look up your North American Industry Classification System Code (NAICS), please access the US Census Bureau website: http://www.census.gov/eos/www/naics/	es
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Certification:       Under penalties of perjury, I certify that:         The information supplied herein, including all attachments, is correct to the best of my knowledge, and         1. In doing business with Florida State University, I or my organization is in compliance with Chapter 112, Florida Statutes, conflict of interest, and I have disclosed the name of any FSU employee who owns, directly or infinetty, an interest of 10% or more in the above organization or any of its branches, and         2. My vendor status with Florida State University has no relation with any employment I may have at FSU or I certify I am not an employee of Florida State University, and         3. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and         4. I am not subject to backup withholding because: (a) I an exempt From backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) The IRS has notified me that I am no longer subject to backup withholding, and         5. I am a U.S. Citizen, including a U.S. resident alien.       Signature of Authorized Person:         Email Address:       nmilburn@admin.fsu.edu	
Name: Nancy Milburn Phone:	
Title: Date: 9/10/2015   5:40 AM PT	
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- A signature screen will pop up and then you can either accept the signature, or click "Change Style" to select a different signature (click to select).
- Once selected, click "Adopt and Sign".

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- The signature will be affixed to the form and then click "Finish" at the bottom of the page.
- This action will submit the form to the appropriate email at FSU and you will receive a copy of the form in your email.

Signature of Authorized Person:	Email Address: Phone: 850-555-5555 Date: 9/10/2015   5:57 AM PT Revised 09/2015 Page 1 of 1
SU Substitute W9 rev2.1.pdf	1 of 1
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eted document.	FINISH OTHER ACTIONS +





- A message will pop up letting you know you are done. Click "Continue".
- You will see on the below notice that the form has been submitted.
- Should you have any questions, please contact our Supplier Relations team at 850-644-6850 or SupplierRelations@fsu.edu





