State of Maine Substitute W-9 & Vendor Authorization Form



PURPOSE: To establish or update an account with the State of Maine's accounting system. Complete this form if: 1) You will receive payment from the State of Maine, and/or 2) You are a vendor who provides services or goods to the State of Maine. This form replaces the IRS W-9 form per the IRS W-9 language; "If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9."

Return to: Maine Ethics Commission 135 State House Station Augusta, ME 04333-0135

207-287-4179

FILL OUT FORM COMPLETELY - ALL AREAS WITH * ARE REQUIRED - ONLY ONE NAME & TIN PER A FORM

TYPE OF REQU	EST*: (Must select one.)	s		
X New Request	Image: New Location/Additional Entry Image: Change O DBA Name O Care Of O Email Only O Ordering Address			
TAXPAYER ID NUMBER* (TIN) (Provide ONE only) Social Security # (person) or a Federal Employer ID # (business) TIN				
TIN Type * choose ONE	Organization Classification * Type * Choose ONE Nonresident Alien			
Social Security No. 🖒 🕱 Individual 🖒 🖾 Individual 🗌 Sole Proprietorship				
C Employer ID No	D. Company Corporation Partnership Trust Estate Other Non-Profit Org Other Gov't Federal Gov't State Gov't Other Foreign (W8 required)			
LEGAL NAME (Must provide: Legal name filed with IRS tied to the ID number, SSN=first & last name/FEIN=business name)				
Legal Name* Alias/DBA MCEA CAMPAIGN ACCOUNT				
Other Info Vendor Customer Number (if known) VC#/VS# Account/Client/Provider Number (if known)				
Payment Address*				
Address	C/O			
City/State/Zip	Phone			
Contact*				
Name	Phone Ext			
Email	Send me Email notifications of DD/EFT (requires Direct Deposit/EFT form to be completed)			
Authorized				

Authorized Signature, Title & Current Date*

Under penalties of perjury, I certify that: 1) The number shown on this form is my correct taxpayer identification number, 2) I am not subject to backup withholding because: (a) I am 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 by the IRS). Ref: www.irs.gov

OFFICE USE ONLY State Agency & SHS #	Information on State Agency Submitting Vendor Form Agency Contact Person Name & Title	OFFICE USE ONLY Contact's Phone #
Ethics, 135 SHS	Julie Aube, Commission Assistant	(207) 287-4179
		ME W9 V5 02/21/20

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES Mail: 135 State House Station, Augusta, Maine 04333 Office: 45 Memorial Circle, Augusta, Maine

> Website: www.maine.gov/ethics Phone: 207-287-4179 Fax: 207-287-6775

INSTRUCTIONS FOR COMPLETING VENDOR FORM

This Vendor form must be submitted to the Commission in order for the State to issue a payment of Maine Clean Election Act funds to a candidate. Please submit this form when you register. You do <u>not</u> need to set up a campaign bank account before submitting this form.

- All candidates participating in the Maine Clean Election Act program must submit this form when they register with the Commission.
- The taxpayer identification number (TIN) is the <u>candidate's</u> social security number (SSN). Do <u>not</u> use the treasurer's SSN or an Employee ID No.
- "The "Legal Name" must match the candidate's name used to get a SSN. If the candidate is using a "DBA" committee, **the "Legal Name" is still the candidate's name**.
- The address on this Vendor form must be the <u>same address</u> on your candidate registration for either you or your treasurer or your campaign committee. If you use EFT/direct deposit to receive your payments, the "Payment Address" on the Vendor form and the "Address of Payee" on the EFT/direct deposit form must match. Please notify the Commission if an address change is needed on your registration.
- Complete the "Contact" section with the name, email address, and phone number of the person you want the state's accounting staff to contact concerning questions about your vendor information.
- If you would like to receive email notifications of direct deposit/EFT transactions, check the box in the "Contact" section.
- "Candidate's Signature" section includes a new IRS requirement. State vendor forms must meet IRS W-9 requirements if a W-9 is not used. <u>MCEA payments are coded as "non-reportable funds" in the State's accounting system and therefore are not considered as income and subject to withholding.</u> By signing, you are certifying that the TIN number used on this form is correct and that you are a U.S. citizen.
- Sign and date the form; the only acceptable electronic signature for the state is Adobe or DocuSign. Both provide legally binding signatures and audit trails.
- Please <u>hand-deliver or mail</u> the completed original form to the Commission at the above addresses. If an electronic signature was used through Adobe or Docusign you may send by encrypted email to your Candidate Registrar or to the Commission Assistant at julie.aube@maine.gov
- Faxed or scanned copies will not processed unless they have an acceptable electronic signature.
- If you need to make any changes to your vendor information, please contact the Commission first.