

15. The Individual(s) or Organization(s) with ownership interest in this Business or Corporate Officers/Directors are:

| | | | | | | | |
|-----------|----------------------------|------------|------------------|--------------------------------------|---|--|--|
| a. | Last Name | First Name | MI | | | | |
| | Title | | | | | | |
| | Organization/Company Name | | | | | | |
| | Street or P.O. Box Address | | | | | | |
| | City | | State | Zip Code | | | |
| | | | [][] | [][][][][][] - [][][][][] | | | |
| | Foreign Country | | Foreign Zip Code | | | | |
| | | | | | Check box below if a separate sheet is attached for additional space. | | |
| b. | Last Name | First Name | MI | | | | |
| | Title | | | | | | |
| | Organization/Company Name | | | | | | |
| | Street or P.O. Box Address | | | | | | |
| | City | | State | Zip Code | | | |
| | | | [][] | [][][][][][] - [][][][][] | | | |
| | Foreign Country | | Foreign Zip Code | | | | |
| | | | | | [][] | | |

16. If Business is listed as Other, what are the names of Principal Organization Officials or Members?

| | | | | | | | |
|-----------|----------------------------|------------|------------------|--------------------------------------|--|---|--|
| a. | Last Name | First Name | MI | | | | |
| | Title | | | | | | |
| | Street or P.O. Box Address | | | | | | |
| | City | | State | Zip Code | | | |
| | | | [][] | [][][][][][] - [][][][][] | | | |
| | Foreign Country | | Foreign Zip Code | | | | |
| | | | | | | Check box below if a separate sheet is attached for additional space. | |
| b. | Last Name | First Name | MI | | | | |
| | Title | | | | | | |
| | Street or P.O. Box Address | | | | | | |
| | City | | State | Zip Code | | | |
| | | | [][] | [][][][][][] - [][][][][] | | | |
| | Foreign Country | | Foreign Zip Code | | | | |
| | | | | | | [][] | |

17. If Business is a Corporation, please answer the following:

| | |
|---|---|
| <p>a. State of Incorporation: [][]</p> <p>c. If yes, what is the name and address of your Parent Corporation? Name Street or P.O. Box Address City State Zip Code Foreign Country Foreign Zip Code</p> | <p>b. Is this Corporation a subsidiary? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>d. Employer Identification Number for this Business (EIN): [][][][] - [][][][][][][]</p> |
|---|---|

Privacy Act Notice. We are authorized to request this information under the Debt Collection Improvement Act of 1996, Title 31 U.S.C. amended section 7701, new subsection (c)(1), which mandates us to require regulated entities and persons who are doing business with a Federal agency to furnish a TIN.

Signature and Title of Official Completing Form _____ Date Form Completed _____