

**Telephone** 859-987-2135 859-255-8310 Fax 859-987-2136

## Michael R. Williams

Bourbon County Judge Executive Courthouse Paris, Kentucky 40361 Magistrates
Bart Horne
Randy Taulbee
Tony Sosby
Scott Wells
Don Menke
Jimmy Mason
Andrew Perraut

COMPANY OR INDIVIDUAL NAME	·
ADDRESS	
As a result of legislation enacted by Congress, recipients of cert. Form 1099 are required to furnish their taxpayer identification furnish this number requires us to withhold tax at 20% from an recipients. The Internal Revenue Service may also impost a \$50 not providing their taxpayer identification number upon requestyou provide us with the following information to insure that ou information in the event we are required to file a Form 1099 for	number to the payer. Failure to y payments made to such 0.00 penalty on any recipient for it. Therefore, we are asking that it records reflect correct
Employer Identification Number	·
OR	
Social Security Number	<del></del>
Check the appropriate description of your busine	ess:
Individual or Partnership Medical Corporation	and the same of th
Corporation	
Other (specify)	
·	
Signature Title	Date