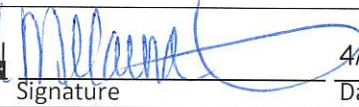


01/2022	CITY OF SOUTH SAN FRANCISCO Vendor Verification Form		
TYPE OR PRINT INFORMATION CLEARLY			
Legal Name of Company (as recorded with the IRS) <u>BRAUN NORTHWEST, INC.</u>		Doing Business as (DBA) if applicable: _____	
Physical Address: (required) <u>150 NORTH STAR DRIVE</u> Number Street Name <u>CHEHALIS, WA 98532</u> City, State and Zip Code		Remittance address (if different from address): <u>PO BOX 1204</u> Number Street Name <u>CHEHALIS, WA 98532</u> City, State and Zip Code	
Business Phone <u>(360) 748-0195</u>		Fax <u>(360) 748-0256</u>	
Principal Contact: <u>BOBBY CHAMBERS</u>			
Business Phone: <u>(707) 804-8832</u>		Email address: <u>bobbychambers@braunnorthwest.ca</u>	
Taxpayer Identification Number <u>91-1344619</u>		EXEMPTION: Exempt from 1099 Reporting? ☐ Y ☒ N If Yes, select from qualifying exemption reason below: ☐ Corporation except there is no exemption for medical, healthcare & legal service payments ☐ Tax Exempt Charity under 501 (C)(3) ☐ The United States or any of its agencies ☐ Other: _____	
Type of merchandise/Service Business Provided: <u>Manufacturer of Emergency vehicles</u>			
You will not be added to the vendor database without the W-9 form. A copy of the Form W-9 is available on the IRS website at: https://www.irs.gov/pub/irs-pdf/fw9.pdf .			
Sign Here:	<u>Melaina Witchey/Accounts Receivable</u> Printed name and title	 Signature	<u>4/21/2023</u> Date
Please return completed forms to City of South San Francisco, PO Box 711 South San Francisco, CA 94083 or send via email to newvendor@ssf.net			
Finance Use only:	New Vendor number: _____		
	Date Received: _____ W-9 Form attached: _____		