



FRISCO
INDEPENDENT SCHOOL DISTRICT

Instructions for FISD Substitute Form W9 and ACH Enrollment Form

Vendors must complete all sections of this form (ACH optional, but strongly encouraged).

PLEASE NOTE: Direct Deposit is the Frisco ISD preferred method for payment of services rendered and/or goods purchased. Each vendor will be required to provide an e-mail address for the receipt notification on the Direct Deposit. The notification will have a voucher attached reflecting the amount of payment and date of deposit. (Deposits are posted on Friday's only.)

Disclaimer: This information will be kept confidential to the extent permissible/possible by a State of Texas public entity, and only used for the purpose of FISD Vendor payments.

Instructions for completing this form

1. Enter your name as shown on your tax return. Name is required, do not leave blank
2. If operating as a DBA, enter that name on line 2, otherwise mark N/A
3. Check **one box only** for your entities federal tax classification. One box must be selected
4. If you have an exemption, enter that on line 4
5. Enter your entity's physical address and remit to address (if different)
6. Enter your entity's physical city, state and zip code and remit to city, state and zip code (if different)
7. Enter your entity's taxpayer identification number (if #2 is applicable) or Social Security Number if you do not operate with an EIN. **Under IRS reporting requirements we are required to obtain the Social Security Number or Employer Identification Number.*
8. You must sign this document verifying your entity name, contact information and taxpayer identification number. This form will be returned to you if not signed and dated.

For Direct Deposit setup:

1. Choose Initial Setup, Change, or Close Account
2. Enter information in all boxes (new and prior banking information is needed if changing account)
3. Enter the email account to be used. Payment modifications will be sent to the email you have provided
4. Attach required documentation
5. The form must be signed and required documentation attached or it will be considered invalid.

Please mail to Frisco Independent School District, Attn: Finance Dept, 5515 Ohio Drive, Frisco, Texas 75035



FRISCO ISD SUBSTITUTE FORM W-9 & ACH ENROLLMENT FORM

Substitute Form W-9: (IRS Rev. December 2014)

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business Name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following boxes:

- ☐ Individual ☐ Sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/Estate
☐ Non-Profit Entity ☐ Government (Local, State or Federal)
☐ Limited Liability Company. Enter the tax classification (C = C Corporation, S = S Corporation, P = Partnership) ____
☐ Other (see instructions) _____

Note: Enter the owner's name on line 1 and mark the appropriate federal tax classification box for disregarded entities.

4 Exemptions: Exempt payee code (if any) ____ Exemption from FATCA reporting code (if any) ____

5 Address:

Remit Address (if different):

6 City, State, and ZIP code

City, State, and ZIP code

7 Taxpayer Identification Number (TIN):

Social Security Number (SSN):

OR

Employer Identification Number (EIN):

Certification:

Under penalties of perjury, I certify that:

1. 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
2. I am not subject to backup withholding due to failure to report interest and dividend income, and
3. I am a U.S. citizen or other U.S. person (defined in the instructions), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

For additional instructions please refer to <http://www.irs.gov/pub/irs-pdf/fw9.pdf> to obtain a copy of the IRS Form W-9 General Instructions.

Signature of US Person: _____

Date: _____

Printed Name: _____

Contact Phone: _____

ACH Enrollment: (Rev. January 2017)

☐ Initial Setup

☐ Change

☐ Close Account

This information is REQUIRED to process ACH payments. Without this information, your payment may be delayed.

Financial Institution Name:	Nine Digit Routing Number:	Prior Routing Number: *
Address:	Depositor Account Number:	Prior Account Number: *
City, State and ZIP code:	Type of Account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	* Prior ACH instructions are required to be completed if changing/updating your ACH instructions

This account will be used for all payments by Frisco ISD unless specified here: _____

E-mail: _____

(Used for ACH payment notification)

Authorized Individual or Entity Signature:	Attachment Required! (Select and attach one of the following items for verification):
Printed Name:	<input type="checkbox"/> Blank check (voided) or
Title:	<input type="checkbox"/> Photocopy of a cleared check or
Date	<input type="checkbox"/> Letter or statement from your financial institution

This authority is to remain in full force and effect until Frisco ISD has received written notification from the vendor of the termination in such time and in such manner as to afford Frisco ISD and the Depository a reasonable opportunity to act on it.)

Please mail form to Frisco Independent School District, Attn: Finance Dept, 5515 Ohio Drive, Frisco, Texas 75035