



**LASORSA**  
**& ASSOCIATES**

Former Secret Service Agent  
Presidential Protection, The White House

**GLOBAL CUSTOMIZED  
PRIVATE SECURITY &  
INVESTIGATIVE SOLUTIONS**

**(888) 831-0809**  
**info@Lasorsa.com**  
**www.Lasorsa.com**



LASORSA  
& ASSOCIATES

# INVESTIGATIVE SERVICES

## Results You Can Count On

LaSorsa & Associates provides you the results other investigative agencies cannot offer. Whether it's our cutting edge technology, highly experienced and professional investigators, or our extreme quality control measures, it all boils down to results. Our investigative results simply blow the competition away.

## Investigative Services:

- Surveillance
- AOE/COE
- Statements
- Facility canvasses (hospital, pharmacy, clinic)
- Activity checks
- Scene canvasses
- Accident reconstruction
- Pre-surveillance investigations
- Internet research
- Social media research
- Employment checks
- Background reports
- Due diligence reports
- Litigation Support & Intelligence
- Asset Searches



## What Sets Us Apart?

- Industry leading 80% surveillance hit ratio
- We lose fewer claimants, burn less cases, and correctly identify and locate more claimants than our competition
- Our investigators average 8 years of experience
- Emphasis on cutting-edge technology
- Continuing education requirements for all staff
- Review of every investigative report



LASORSA  
& ASSOCIATES

# SURVEILLANCE

## Results You Can Count On

Nothing in the anti-fraud arsenal can combat a potential fraudulent claim like surveillance. Effective surveillance can help mitigate the exposure on even the toughest claims, and this is where LaSorsa & Associates stands above the rest.

Combine a verifiable 80% + video hit percentage with high definition cameras, the industry's best investigators and the results will earn your trust and keep your business.

## Included with all 24hr+ surveillance cases, Social Media Investigation includes:

- Background check
- Criminal check
- Social networking investigation

### What Sets Us Apart?

Our Preliminary Investigations Team conducts a pre-investigative work-up of a file. Before surveillance is conducted this information is provided to the investigator to fully equip our field team with the knowledge needed to conduct an effective and successful surveillance assignment.





# STATEMENTS

## Experience Like No Other

A professionally conducted statement can be a priceless tool in determining the compensability and subrogation potential of a claim. Our highly experienced investigators have conducted thousands of interviews related to all lines of insurance claims. They are expertly trained in verbal and non-verbal communication and ask the important follow up questions that provide our clients with all of the important facts.

## What Sets Us Apart?

- Fully dedicated investigators whose sole function is to conduct statements
- Unlike other companies, we understand that there is a clear difference in skill sets between surveillance and statement investigators and that a “one size fits all” approach is not the most effective method for statements
- Stringent continuing education requirements for investigators

**LASORSA & ASSOCIATES**  
FORMER SECRET SERVICE AGENT - PRESIDENTIAL PROTECTION THE WHITE HOUSE  
YOUR GLOBAL SOURCE FOR SECURITY CONSULTING, PRIVATE INVESTIGATIONS,  
TECHNICAL SURVEILLANCE, COUNTER-MEASURES & EXECUTIVE PROTECTION  
1 (888) 831-0809 WWW.LASORSA.COM INFO@LASORSA.COM

### APPLICATION FOR EMPLOYMENT

I hereby certify that the information furnished on this form is true and correct. I am aware that this form and the handling thereof complies with federal and state laws against discrimination.

Are you legally entitled to work in the U.S.?  Yes  No

Will Accept:  
 Part-Time  
 Full-Time  
 Temporary

Shift:  
 Day  
 Night  
 Other

Available

Test Passed?  Yes  No

Earned

**GENERAL INFORMATION**  
Name (Last) \_\_\_\_\_  
Address (Mailing Address) \_\_\_\_\_  
E-Mail Address \_\_\_\_\_

**POSITION**  
Position \_\_\_\_\_  
Type Of Employment Desired \_\_\_\_\_

the essential functions of the job you are applying for?  Yes  No

**LASORSA & ASSOCIATES**  
Reality-Efficiency-Survivability  
www.LaSorsa.com



## Why Conduct a Medical Canvass?

A properly conducted medical canvass is an invaluable and cost effective tool in determining past medical history and pre-existing conditions. We offer a fast, accurate, and cost-effective way to help ensure a claim is evaluated properly. Unlike other medical canvass companies, we offer a comprehensive search that can be tailored to each subject.

### Medical Facilities:

- Hospitals
- Pharmacies
- Walk-in Clinics

### Optional Facilities:

- Diagnostic
- Imaging
- Orthopedic
- Labs
- Gyms

### What Sets Us Apart?

- 90% + hit ratio
- More information, such as prescription types, treatment plans, and future appointments





## A Proactive Approach

Subrogation recovery starts the moment a claim occurs when an adverse party has impacted the outcome of an insurance claim. We work closely with our insured, employer, injured worker and claims staff to ensure we have all relevant information for a potential recovery. After gathering all pertinent information, the at fault party or parties are identified and placed on notice.

Subrogation is a part of our service model and plays an active role by working simultaneously with Claims, Loss Control, SIU and Fraud. Subrogation better focuses all departments by identifying possible recoveries at the onset of a claim.

## Subrogation Services:

- We review every incoming claim for subrogation potential
- Integrated evaluation and direction between SIU and Claims
- Lien letters are sent on all subrogation claims
- Pursuit of all open and closed claims
- Aggressive pursuit of all avenues of subrogation to ensure maximum results



## What Sets Us Apart?

- Front line communication with our Claims Department to begin review, determination, and pursuit of recoveries
- Swift interaction between subrogation, claims, loss control, and SIU
- Proactive subrogation protocols
- High risk catastrophic claim triage protocols resulting in a higher recovery
- Experienced claims professionals with multi-jurisdictional knowledge



## A Wholistic Approach

We offer all types of background checks, including criminal background checks, to businesses and individuals. With a combination of at-the-source record searches and the industry's most comprehensive criminal conviction and personal information databases including county court records, state repositories, departments of corrections, administrative office of courts, state sex and violent offender registries, government exclusion and terrorist watch lists, and more. You can be confident that the information you receive is comprehensive, accurate and timely.

## Background Reports include:

- Name, Birth Date, SSN verification, Current Address & Address History
- Driver's License Info, Phone Numbers & Email Addresses
- Criminal History, Accidents & Traffic Crimes
- Civil Court Records, Bankruptcies, Liens & Judgments
- Properties Owned/Rented, Evictions, Foreclosures & Assessments
- UCC Filings, Professional Affiliations & Licenses
- Relatives & Associates Contact Information



### What Sets Us Apart?

- 500 million criminal records from over 1,000 sources
- Confident, accurate and timely.
- Cost Effective & Comprehensive
- Multi-Jurisdictional and Nationwide



## Corporate Intelligence

A due diligence investigation can uncover details of a company's management, finances, performance, mission, history, suppliers, clients, industry and many other details that may affect how a company does business and ensures that liabilities are not hidden. We can conduct forensic accounting investigations, background checks, surveillance, mystery shopping, asset searches, and other business investigation methods to find out what is happening at a location to give you the most complete picture of the company. We can also review public records and speak with clients or customers to uncover the legitimacy and potential of a company.

## Due Diligence Reports include:

- Corporate registry & filing records
- Criminal records queries
- Civil court record queries
- Intellectual property, assets and facilities
- Individual profiles on corporate officers
- Liabilities and equity
- Media searches

## What Sets Us Apart?

- Attention to detail on what matters.
- Experienced investigators.
- Return on investment.
- International capabilities.







## Rapid Response

Our Loss Control Department offers a wide variety of loss protection and specialized safety programs to our clients. Our proactive approach helps to improve insurance loss ratios while providing the latest information to enhance existing work place safety programs. Specific workplace exposures are addressed one by one with safety, claims management, medical management, fraud prevention, fraud mitigation, and subrogation.

Loss Control plays a vital role in the service model. We fully integrate the post-accident scene after an accident occurs. We work hand in hand with SIU to provide loss control expertise while a claim is being investigated. This formula has been proven to impact the effectiveness of investigations and loss control.

## Loss Control Services:

- On site hazard assessment to determine incident-producing exposures with practical recommendations to improve workplace safety
- Loss analysis to highlight trends and set service priorities
- Onsite safety training
- Establish a loss control service plan, as well as review and evaluate current safety plans, to prioritize and address loss producing procedures



## What Sets Us Apart?

- 24/7, “boots-on-the-ground” response to catastrophic accidents
- Customized service plans tailored to our clients
- Dedicated, talented experts throughout the country



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# TECHNICAL SURVEILLANCE

## Confidential, Professional and Dependable

In today's world despite the laws designed to protect from this type of invasion, almost anyone can easily and cheaply acquire surveillance devices or bugs that can be used to invade your privacy and intercept valuable information. Our dependable, discreet and highly professional Technical Surveillance Countermeasures (TSCM) or bug sweeps can help individuals and businesses protect their privacy and confidential information.



Given the complexity of today's threats, it is essential to use highly trained, qualified technicians. We utilize state-of-the-art devices to perform frequency spectrum analysis and other technical searches. These search techniques cover the entire usable frequency spectrum and can even find bugs that are inactive or turned off. In addition, the area will be physically inspected thoroughly to detect covert devices. Our technicians are some of the most highly trained specialists in the world, most with former federal agency training and experience.

### What Sets Us Apart?

- Experienced and highly trained technicians
- Rapid response anywhere in the continental US with international capability
- Our business is to keep yours private





# INVESTIGATOR NETWORK

- California**  
Aguanga  
Anaheim  
Beverly Hills  
Castro Valley  
Covina  
Fresno  
Healdsburg  
Lakewood Long Beach  
Los Angeles Metro  
Modesto  
Moraga  
Murrieta  
Newark  
Northridge  
Oakland  
Palmdale  
Roseville  
Sacramento  
San Diego  
San Francisco  
Selma  
Valencia  
West Sacramento  
Westminster
- Ohio**  
Bellefontaine  
Cincinnati  
Cleveland  
Pataskala
- Italy**  
Rome  
Milan  
Venice  
Florence  
Naples  
Palermo
- Delaware**  
Dover  
Wilmington
- Florida**  
Cape Coral  
Clearwater  
Cutler Bay  
Davie  
Deltona  
Daytona  
Fort Lauderdale  
Jacksonville  
Lake Mary  
Lake Worth  
Merritt Island  
Miami  
Middleburg  
Ocala  
Orange Park  
Orlando Metro  
Palm Coast  
Plantation  
Port Charlotte  
Port Richey  
Sanderson  
Sanford  
Satellite Beach  
Seminole  
St. Petersburg  
Tampa  
Weston
- Georgia**  
Adel  
Atlanta Metro  
Macon Metro  
Savannah  
Sugar Hill  
Valdosta  
Vidalia  
Villa Rica
- Illinois**  
Chicago
- Indiana**  
Indianapolis  
Michigan City
- Kansas**  
Lawrence
- Michigan**  
Detroit  
Metro  
Ypsilanti
- Missouri**  
St. Louis  
Joplin  
Liberty  
O'Fallon  
Troy
- Caribbean & Bahamas**  
Anguilla Antigua Aruba  
Bahamas Barbados Bermuda  
British Virgin Islands Caribbean Islands  
Cayman Islands Costa Rica Dominica  
Dominican Republic El Salvador Europe Guatemala  
Honduras Jamaica Antilles Nevis Nicaragua  
Panama Puerto Rico St. Croix St. John St. Kitts  
St. Lucia St. Thomas St. Vincent Trinidad & Tobago  
Turks & Caicos U.S. Virgin Islands  
Venezuela Veracruz
- New Jersey**  
Hainesport  
Jersey City Metro  
New Milford  
Newark Metro  
Pitman  
Trenton Metro
- New York**  
Baldwin  
Bronx  
East Northport  
Endwell  
Jericho  
Manhattan Metro  
New York Metro  
Phillipsport  
Van Etten  
West Islip
- North Carolina**  
Charlotte  
Raleigh/Durham  
Jacksonville  
Asheville  
Boone  
Outer Banks  
Greensboro  
Highpoint
- Utah**  
Salt Lake City
- Pennsylvania**  
Aston  
Erie  
Exton  
Glendale  
Jefferson Township  
Mechanicsburg  
Philadelphia Metro  
Pittsburg  
Reading
- Tennessee**  
Nashville Metro  
Sevierville
- Texas**  
Austin Metro  
Bedford  
Dayton  
Dallas Metro  
Denton  
Forreston  
Houston  
Marion  
McKinney  
Mercedes  
Murchison  
San Antonio
- Connecticut**  
Hartford  
Milford
- Europe**  
Belgium  
Denmark  
Germany  
France  
Spain  
Switzerland  
Sweden

Updated: 8/15/15





|   |  |
|---|--|
| <b>Surveillance:</b>  | \$595 / day*   |
| <b>NY &amp; CA:</b>   | \$695 / day*   |
| <b>Two Investigators:</b>   | \$995 / day*   |
| <b>Two Investigators - NY &amp; CA:</b>                                     | \$1095 / day*  |
| <b>Comprehensive Background Check<br/>&amp; Social Media Investigation:</b> | \$350 *Included with surveillance                          |
| <b>Activity Check:</b>  | \$395.00 / location  |
| <b>AOE/COE/Statements</b>   | \$75 / hour  |
| <b>Background/Criminal Check:</b>   | \$250  |
| <b>Local Medical Canvass:</b>   | \$350 - Additional Medical<br>Canvass (Same Subject) \$300 |
| <b>Social Media Investigation:</b>  | \$100  |
| <b>Incarceration Check:</b>   | \$75 / hour  |
| <b>SSN/Verification Service</b>   | \$25 / SSN Match:<br>additional investigation \$75 / hour  |
| <b>LE Assist:</b>   | \$75 / hour  |
| <b>Alive &amp; Well Check</b>   | \$75 / hour  |
| <b>Dependency Check:</b>  | \$75 / hour  |
| <b>Legal Searches &amp; Investigative Support:</b>                          | \$75 / hour  |
| <b>Copy Service for Legal:<br/>(claims defense litigation)</b>              | \$75 / hour (plus .50 per copy page)                       |
| <b>DVD Copy:</b>  | \$25 / copy  |
| <b>Subrogation Case Development:</b>  | \$75 / hour  |

\*Per 8 Hour Day



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/26/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|   |   |                                      |               |
|---|---|--------------------------------------|---------------|
| <b>PRODUCER</b><br>El Dorado Insurance Agency, Inc.<br>El Dorado Sec Srvs Ins Agy<br>PO Box 66571<br>Houston TX 77266 | <b>CONTACT NAME:</b> Jennifer Leroy<br><b>PHONE (A/C, No. Ext):</b> (713) 521-9251<br><b>E-MAIL ADDRESS:</b> jleroy@eldoradoinsurance.com | <b>FAX (A/C, No):</b> (713) 521-0125 |               |
|   | <b>INSURER(S) AFFORDING COVERAGE</b><br>INSURER A: Allied World Surplus Lines   |                                      | <b>NAIC #</b> |
| <b>INSURED</b><br>LaSorsa & Associates LLC<br>322 Silver Creek Landing<br>Swansboro NC 28584                          | <b>INSURER B :</b>  |                                      |               |
|   | <b>INSURER C :</b>  |                                      |               |
|   | <b>INSURER D :</b>  |                                      |               |
|   | <b>INSURER E :</b>  |                                      |               |
|   | <b>INSURER F :</b>  |                                      |               |
|   |   |                                      |               |

**COVERAGES**                      **CERTIFICATE NUMBER:** Certificate (6/15)                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD                | SUBR WVD                 | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|--------------------------|--------------------------|---------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>                                   |                          |                          | 5200-1232-01  | 7/16/2015               | 7/16/2016               | EACH OCCURRENCE \$ 1,000,000                         |
|          | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR                            |                          |                          |               |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 |
|          | <input checked="" type="checkbox"/> <b>Errors &amp; Omissions</b>   |                          |                          |               |                         |                         | MED EXP (Any one person) \$ 10,000                   |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:  |                          |                          |               |                         |                         | PERSONAL & ADV INJURY \$ 1,000,000                   |
|          | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |                          |                          |               |                         |                         | GENERAL AGGREGATE \$ 3,000,000                       |
|          | OTHER:  |                          |                          |               |                         |                         | PRODUCTS - COMP/OP AGG \$ 3,000,000                  |
|          | <b>AUTOMOBILE LIABILITY</b>   |                          |                          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$               |
|          | <input type="checkbox"/> ANY AUTO   |                          |                          |               |                         |                         | BODILY INJURY (Per person) \$                        |
|          | <input type="checkbox"/> ALL OWNED AUTOS  | <input type="checkbox"/> | <input type="checkbox"/> |               |                         |                         | BODILY INJURY (Per accident) \$                      |
|          | <input type="checkbox"/> HIRED AUTOS  | <input type="checkbox"/> | <input type="checkbox"/> |               |                         |                         | PROPERTY DAMAGE (Per accident) \$                    |
|          | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> |               |                         |                         | \$   |
|          | <b>UMBRELLA LIAB</b>  |                          |                          |               |                         |                         | EACH OCCURRENCE \$                                   |
|          | <input type="checkbox"/> OCCUR  |                          |                          |               |                         |                         | AGGREGATE \$   |
|          | <b>EXCESS LIAB</b>  |                          |                          |               |                         |                         | \$   |
|          | <input type="checkbox"/> CLAIMS-MADE  |                          |                          |               |                         |                         | \$   |
|          | DED   |                          |                          |               |                         |                         | \$   |
|          | RETENTION \$  |                          |                          |               |                         |                         | \$   |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>  |                          |                          |               |                         |                         | PER STATUTE OTH-ER                                   |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)                               |                          |                          |               |                         |                         | E.L. EACH ACCIDENT \$                                |
|          | If yes, describe under DESCRIPTION OF OPERATIONS below  |                          |                          |               |                         |                         | E.L. DISEASE - EA EMPLOYEE \$                        |
|          |   |                          |                          |               |                         |                         | E.L. DISEASE - POLICY LIMIT \$                       |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

|  |   |
|--|---|
| <b>CERTIFICATE HOLDER</b><br>El Dorado Insurance Agency<br><b>SPECIMEN</b><br>El Dorado Insurance Agency | <b>CANCELLATION</b><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
|  | <b>AUTHORIZED REPRESENTATIVE</b><br>R.L. Ring, Jr./JL03   |

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

|   |  |  |
|---|--|--|
| Print or type<br>See Specific Instructions on page 2. | <b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.   |  |
|   | <b>2</b> Business name/disregarded entity name, if different from above  |  |
|   | <b>3</b> Check appropriate box for federal tax classification; check only <b>one</b> of the following seven boxes:<br><input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate<br><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____<br><b>Note.</b> For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.<br><input type="checkbox"/> Other (see instructions) ▶ _____ | <b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):<br>Exempt payee code (if any) _____<br>Exemption from FATCA reporting code (if any) _____<br><i>(Applies to accounts maintained outside the U.S.)</i> |
|   | <b>5</b> Address (number, street, and apt. or suite no.)   | Requester's name and address (optional)  |
|   | <b>6</b> City, state, and ZIP code   |  |
|   | <b>7</b> List account number(s) here (optional)  |  |

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

|                                       |  |  |  |   |  |  |   |  |  |
|---------------------------------------|--|--|--|---|--|--|---|--|--|
| <b>Social security number</b>         |  |  |  |   |  |  |   |  |  |
|                                       |  |  |  | - |  |  | - |  |  |
| <b>or</b>                             |  |  |  |   |  |  |   |  |  |
| <b>Employer identification number</b> |  |  |  |   |  |  |   |  |  |
|                                       |  |  |  | - |  |  |   |  |  |

**Note.** If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

## Part II 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 because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (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 below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

|                  |                            |                |
|------------------|----------------------------|----------------|
| <b>Sign Here</b> | Signature of U.S. person ▶ | Date ▶ 4/13/15 |
|------------------|----------------------------|----------------|

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.