DIRECT DEPOSIT REQUEST FORM

Please Complete this form clearly, print and sign.

Driver's Name		
LEANDRO	PODRIGO	DE REZENT
Routing Number		,
026073008		
Account Number		
652118094109	·	
Please circle one		
CHECKING	SAVING	
X		
I Authorize Royal and BRZ to automa	atically deposit my payche	ck into account
listed above.		
Driver Signature		Date
		4/1/25

California &

APPLY

CLASS A



008 04/15/1972 RSTR.NONE 3700 S SEPULVEDA BLVD APT 331 LOS ANGELES, CA 90034 LEANDRO RODRIGO END IN

DD 12/13/2023/98E3/AAFD/2

12/13/2023

EYES GRN 04151972 Form (Rev. October 2018)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

> Go to www.irs.gov/FormW9 for instructions and the latest information.

illenna.	Revenue Service	on your income tax return). Name is required on this line; do n			
Print or type. See Specific Instructions on page 3.	Leanter) Rodrian de Rejoinde			
	2 Business name/di	sregarded entity name, if different from above	Executive disease in the control of		
				4	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. Corporation Scorporation Partnership Trust/estate		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):		
	Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC		Exempt payee code (if any)		
	Limited liability	company. Enter the tax classification (C=C corporation, S=S	corporation, P=Partnership) >		
	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.			Exemption from FATCA reporting code (if any)	
	Other (see inst	tructions) >			(Applies to accounts maintained outside the U.S.)
	5 Address (number,	, street, and apt. or suite no.) See instructions.	Request	er's name a	ind address (optional)
	717	VERONIC CIRC			
	6 City, state, and Z	N) 2/17/	/		
	OCOEE 7 List account number	T. 2-1101			
	2 List account number	oer (s) there (d) broner)			
Pa	Taypay	ver Identification Number (TIN)	***************************************	·····	
back	up withholding. For ent alien, sole propi	propriate box. The TIN provided must match the name individuals, this is generally your social security numb rietor, or disregarded entity, see the instructions for Poyer identification number (EIN). If you do not have a number (EIN).	oer (SSN). However, for a art I, later. For other	O 4	- 1 1 - 9 3 1 9
TIN, I		er identification number (Env). If you do not have a no		or	
		more than one name, see the instructions for line 1.	Also see What Name and	Employer	identification number
Numi	ber To Give the Req	quester for guidelines on whose number to enter.			-
Par	t II Certific	cation	Address of the Control of the Contro	h	And a state of the
	er penalties of perjui		And anything agreement of the state of the s		
2. la Se	m not subject to ba ervice (IRS) that I am	n this form is my correct taxpayer identification numbe ackup withholding because: (a) I am exempt from back in subject to backup withholding as a result of a failure backup withholding; and	cup withholding, or (b) I have I	not bean r	otified by the Internal Revenue
3.1a	m a U.S. citizen or	other U.S. person (defined below); and			
		ntered on this form (if any) indicating that I am exempt			
you h	nave failed to report a	s. You must cross out Item 2 above if you have been not all interest and dividends on your tax return. For real esta ent of secured property, cancellation of debt, contribution vidends, you are not required to sign the certification, but	ate transactions, item 2 does no ins to an individual retirement a	ot apply. Fo rrangemen	or mortgage interest paid, t (IRA), and generally, payments
Sign			Date >	4111	2 5
Ge	neral Instr	uctions	Form 1099-DIV (dividends funds)	, including	those from stocks or mutual

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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-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, later.

Banking Details	Hel
Recommended	
ACH Routing Number ①	
026073150	D
Up to 3 business days. US\$ 0 fee.	
WIRE Routing Number ①	
026073008	D
Up to 3 business days. US\$6 fee for Nomad	
Pass customers up to level 3.	
You are Nomad Pass level 4	

Account holder
Leandro Rodrigo De Rezende

Account
652118094109

Account type
Checking account

Bank code ①

Share banking details

Show receiving limits

Help

Account holder Leandro Rodrigo De Rezende Account 币 652118094109 Account type **Checking account** Bank code ① Community Federal Savings Bank Bank address 8916 Jamaica Ave, Woodhaven, NY 巾 11421 Personal address Rua Cicero Ferreira 10 ap 708, Serra, Belo Horizonte, MG 30220-040

Banking Details

You are Nomad Pass level 4

Share banking details

Show receiving limits