Florida

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ANDEN C631-840-58-423-1

1 COURT VAZQUEZ 208ALDO 826541 TIM TAM PL WESLEY CHAPEL, FL 33544-1547 3 008 11/23/1958 15 SEX M SAFE DRIVER 45 EXP 11/23/2026 16 HGT 6'-00" 12 REST A 94 END T

HAZMAT UNTIL 11/23/18

4a ISS 10/12/2018

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Operation of a motor vehicle constitutes consent to any sobriety test required by law.

(Rev. October 2018) Department of the Treasury				Give Form to the requester. Do not send to the IRS.	
nternal Abyonus Service	Go to www.irs.gov/FormW9 for in		st information.		
Jame (as shown o	in your income tax return). Name is required on this line; o	do not leave this line blank.			
2 Business name/dit	sregarded entity name, if different from above	CAVEL			
	a compared a strict in a strict of the strict of the				
3 Check appropriate following sevan bo	Check appropriate box for federal fax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.			4 Exemptions (codes apply only to certain entities, not individuats; see instructions on page 3):	
single-member		n LJ Parnenanp	L_ Insvestage	Exempt payee code (if any)	
Note: Check th LLO if the LLC i another LLC this	company. Enter the tax classification (G=C corporation, e appropriate box in the line above for the tax classificati is classified as a single-member LLC that is disregarded f at is not disregarded from the owner for U.S. federal tax j from the owner should check the appropriate box for the	ion of the single-member ow from the owner unless the or purposes. Otherwise, a single	nar. Do not check wher of the LLC is e-member LLC that	Exemption from FATCA reporting code (if any)	
Other (see instr				(Applies to pocounts maintained outside the U.S.)	
a 21 -1	street, and apt. or suite no.) See instructions.		Requester's name a	nd address (optional)	
6 gay, state, and ZIF					
WEST	EY CHAPEL, FL.	33544			
7 List account number	er(s) here (optional)				
Part I Taxpavo	er Identification Number (TIN)				
mber To Give the Requ	more than one name, see the Instructions for line the lester for guidelines on whose number to enter.	1. Also see What Name a	nd Employer I	dentification number	
Part II Certifica					
I am not subject to back	this form is my correct taxpayer identification num kup withholding because: (a) I am exempt from ba subject to backup withholding as a result of a fallu	ackup withholding, or (b)	have not been no	tified by the Internal Revenue	
	her U.S. person (defined below); and				
The PATRA AND A	ered on this form (if any) indicating that I am exem	pt from FATCA reporting			
rtification instructions. b have failed to report all quisition or abandonmen her than interest and divid	You must cross out item 2 above if you have been n interest and dividends on your tax return. For real es t of secured property, gancellation of debt, contribut dends, you are not required to sign the certification, t	state transactions, item 2 d tions to an individual retire	does not apply. For ment arrangement	mortgage interest paid, (IRA), and generally, payments	
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DIRECT DEPOSIT REQUEST FORM

Please Complete this form clearly, print and sign.

Account Number

Routing Number

Driver's Name

7091934765

UBALDO COURT

2560 - 7497 - 4



SAVING

I Authorize Royal and BRZ to automatically deposit my paycheck into account listed above.

Driver Signature Date AHCA 10/25/24



1 of 3

FIC



Photo 💊

Done

Statement of Account

Statement Period 08/27/24 - 09/26/24

Access No. 13227791

Routing Number: 2560-7497-4

Questions about this Statement? Toll-free in the U.S. 1-888-842-6328 For toll-free numbers when overseas, visit navyfederal.org/overseas/ Collect internationally 1-703-255-8837

Say "Yes" to Paperless! View your digital statements via Mobile or Navy Federal Online Banking.

Mobile Banking Is Getting an Exciting Upgrade!

Coming soon: a more seamless mobile banking experience! Visit navyfederal.org/digitalbanking for a look at the changes to come, including improved money movement options and helpful spending categories to stay organized.

Summary of your deposit accounts

	Previous Balance	Deposits/ Credits	Withdrawala/ Debits	Ending Balance
EveryDay Checking 7091934765	\$326.22	\$680.01	\$783.94	\$222.29
Membership Savings 3113664622	\$692.65	\$0.16	\$50.00	\$642.80
Totals	\$1,018.87	\$680.16	\$833.94	\$865.09

BWNLLSV @00000003R2WWY1A5@000SME00F PATRICIA COURT 26541 TIM TAM PL WESLEY CHAPEL FL 33544-1547

PATRICIA COURT

13227791

MARK 'X' TO CHANGE ADDRESS/ORDER ITEMS ON REVERSE



DEPOSIT VOUCHER

(FOR MAIL USE ONLY. DO NOT SEND CASH THROUGH THE MAIL DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL)

ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT ENCLOS
7091934765	Checking	
3113654622	Savings	
	TOTAL	

NFCU PO BOX 3100 MERRIFIELD VA 22119-3100

