DIRECT DEPOSIT REQUEST FORM

Please Complete this form clearly, print and sign.

Driver's Name	
Bryan Lee Palacios	
Routing Number	
031101279	
Account Number	
766103360133	
Please circle one	
CHECKING	ING
I Authorize Royal and BRZ to automatical listed above.	y deposit my paycheck into account
Driver Signature	Date
	1/27/2005

(Rev. October 2018)

Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

***************************************	Name (as shown on your income tax return). Name is required on this line; or BNAN LEE PALACIOS	do not leave this line blank.	01404.0140 000 00400400400	***************************************			***************************************				Medica	
	2 Business name/disregarded entity name, if different from above		i Andrea de Andrea de Constituto de Andrea de Constituto de Constituto de Constituto de Constituto de Constitu	***************************************				***************************************	*******		******	
Print or type. See Specific Instructions on page 3.	following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):						
	III Individual/sole proprietor or Corporation Scorporation Partnership The single-member LLC					ipt paye	e cod	e (if an	y)			
	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶											
	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.					code (if am)						
ped	Other (see instructions) ▶ 5 Address (number, street, and apt. or suite no.) See instructions. Requester's name a						(Applies to accounts maintained outside the U.S.)					
8 69	7107 Forest Mere Dr	Requester's name and address (optional)										
	6 City, state, and ZIP code											
_	Riverview, FL 3357B		***************************************	ngana ing ang maka pina	· rangement eroma				***************************************			
	7 List account number(s) here (optional)											
Part	Taxpayer Identification Number (TIN)	.cocurcidaciones de la companya del companya del companya de la co			**************	munual district				mon make sequence of	0000000	
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid						numbe	r			**********		
backup		03		71	0	21	4	01	1			
entities TIN, lat	, it is your employer identification number (ÉIN). If you do not have a	a L				4		1	-11-	7		
Note:	f the account is in more than one name, see the instructions for line	1. Also see What Name a	p	Employe	r identi	ficatio	n num	ber				
Numbe	r To Give the Requester for guidelines on whose number to enter.		-						T			
Part	II Certification	#*************************************				<u></u>					*********	
District Control of the Control of t	penalties of perjury, I certify that:	THE CONTROL OF THE CO	******************	***************************************	***********	***************************************			***********		A1114411	
1. The 2. I am Serv	number shown on this form is my correct taxpayer identification num not subject to backup withholding because: (a) I am exempt from ba- ice (IRS) that I am subject to backup withholding as a result of a failu- inger subject to backup withholding; and	ackup withholding, or (b)	I have no	t been r	notifie	d by th	e Inte	mal F	Reve e tha	nue at I ar	m	
3. I am	a U.S. citizen or other U.S. person (defined below); and											
	FATCA code(s) entered on this form (if any) indicating that I am exem											
you nav	eation instructions. You must cross out item 2 above if you have been refailed to report all interest and dividends on your tax return. For real eation or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification,	state transactions, item 2 tions to an individual retire	does not ement arra	apply. F	or mor	tgage	interes ienera	st paic	i, vme	nts	58	
Sign Here	Signature of U.S. person ≫		ate >	<u>U</u>	271	306	35				*******	
	eral Instructions	 Form 1099-DIV (div funds) 	idends, i	ncluding	those	e from	stock	s or n	nutu	al		
Section noted.	references are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)										
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.		 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) 										
	ose of Form	 Form 1099-S (proceeds from real estate transactions) Form 1099-K (merchant card and third party network transactions) 										
An indi	vidual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	• Form 1098 (home in 1098-T (tuition)										
identifi	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	• Form 1099-C (cano										
	remove and the control of the contro	Form 1099-A (acquisition or abandonment of secured property)										
	er identification number (ATIN), or employer identification number							,				
amoun	ar identification number (ATIN), or employer identification number or report on an information return the amount paid to you, or other treportable on an information return. Examples of information include, but are not limited to, the following.	 Form 1099-A (acqui Use Form W-9 only allen), to provide you 	y if you a	re a U.S				,		nt		

Form W-9 (Rev. 10-2018)

be subject to backup withholding. See What is backup withholding,

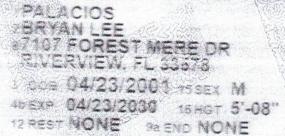
later.

• Form 1099-INT (interest earned or paid)

Florida



40 DLN P422-072-01-1



SAFE DRIVER 42 185 04/29/2021 500 L702407230078

REPLACED 91/23/2024

Operation of a motor vehicle constitutes consent to any sobnety fest required by law.





← Account info

Routing number

031101279

Account number

766103360133

View cards

Debit card

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Credit Builder card

Account limits

View limits

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