



**Greeley-Evans**  
**Weld County School District 6**

1025 NINTH AVENUE | GREELEY, COLORADO 80631  
970-348-6000 | WWW.GREELEYSCHOOLS.ORG

**FINANCE**  
**DEPARTMENT**

Dear Vendor:

The Federal Income Tax law requires a Form 1099 information return with a valid identification number to be filed for certain payments that are made in the course of conducting a trade of business. All payees who **have not** submitted a correct Federal Tax Identification Number may be subject to a 31% Backup Federal Income Withholding on their payments.

In order for Weld County School District 6 to comply with the reporting requirements, please complete the following and mail to the above address, or fax to the Purchasing Department at 970-348-6033.

The State of Colorado enacted Senate Bill 05-73. This change in law counts work under any arrangement by a PERA (Colorado Public Employee's Retirement Association) retiree for a PERA employer toward the 110-day per calendar year limit as well as for employer contributions.

As of July 1, 2005, the Weld County School District 6 is required to report to PERA any tax-related information on employees or other individuals or firms whereby the District receives services in any form. If you are currently receiving PERA benefits, any payments made to you will affect the 110-day calendar year limit provisions set for by PERA.

*(This form is in lieu of the IRS W-9 Form)*

1. Are you a PERA Retiree? Yes No

*NOTE - If you are a PERA Retiree and you fail to indicate such, you will be required to pay the employer contribution amount plus any interest as stated on page 3 of PERA's "Working After Retirement" publication. Please contact PERA with any questions regarding your responsibilities as a PERA Retiree performing work for a PERA employer.*

2. Are you an employee of an organization operating under PERA? Yes No

3. Social Security Number OR Employer Identification Number  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Example: 84-1234567)

*NOTE for PERA RETIREES - if you use a Federal Tax ID#, please also include your Social Security# for our reporting to PERA.*

4. Type of Entity (Check One)  
Individual Government Agency  
Sole Proprietorship Tax Exempt Organization  
Partnership Other (explain) \_\_\_\_\_  
Corporation

5. Vendor accepts Credit Cards? Yes No

6. Nature of Business / Service \_\_\_\_\_

7. Name \_\_\_\_\_

(If applicable), Doing Business As \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Vendor E-Mail Address \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title*