Form		Certificate of For				ner		
Depa	February 2006) tment of the Treasury al Revenue Service	 For United States Tax Withholding ▶ Section references are to the Internal Revenue Code. ▶ See separate instructions. ▶ Give this form to the withholding agent or payer. Do not send to the IRS. 					OMB No. 1545-1621	
	ot use this form for:			,			Instead, use Form:	
		person, including a residen					W-9	
	person claiming that incor a trade or business in the	me is effectively connected	with the conduct				W-8ECI	
 A A for 	foreign partnership, a fore foreign government, interr eign private foundation, o	ign simple trust, or a foreig national organization, foreign or government of a U.S. pos	n central bank of issue, session that received ef	foreign tax-exe fectively conne	empt organizat		.W-8ECI or W-8IMY	
		section(s) 115(2), 501(c), 89 te Form W-8BEN if they are					.W-8ECI or W-8EXP	
clain	they are a foreign persor	n exempt from backup with	holding.			<i>iy 10</i>		
	person acting as an interr : See instructions for add						W-8IMY	
Ра		on of Beneficial Owne	, ,					
1	Name of individual or or	ganization that is the benef	icial owner		2 Cou	ntry of incorp	ooration or organization	
3	Type of beneficial owner	r: 🗌 Individual	Corporation	Disregard	led entity	Partnership	Simple trust	
	Grantor trust	Complex trust	Estate	Governm	ent	International	organization	
	Central bank of issue	Tax-exempt organize						
4	Permanent residence ad	ldress (street, apt. or suite r	no., or rural route). Do n	ot use a P.O.	box or in-car	e-of address	.	
	City or town, state or province. Include postal code where appropriate.					Country	Country (do not abbreviate)	
5	Mailing address (if different	ent from above)						
	City or town, state or province. Include postal code where appropriate.					Country	Country (do not abbreviate)	
6	U.S. taxpayer identification number, if required (see instructions) SSN or ITIN EIN K Foreign tax identifying number, if any (opt							
8	Reference number(s) (se	e instructions)						
Pa	t II Claim of Tax	x Treaty Benefits (if a	pplicable)					
9	I certify that (check all		,					
а								
b								
С	The beneficial owner is not an individual, derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits (see instructions).							
d	The beneficial owner is not an individual, is claiming treaty benefits for dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation, and meets qualified resident status (see instructions).							
е	The beneficial owner is related to the person obligated to pay the income within the meaning of section 267(b) or 707(b), and will file Form 8833 if the amount subject to withholding received during a calendar year exceeds, in the aggregate, \$500,000.							
10	Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Articleof the							
	treaty identified on line 9a above to claim a% rate of withholding on (specify type of income):							
	Explain the reasons the beneficial owner meets the terms of the treaty article:							
Pa	rt III Notional Pri	incipal Contracts						
11	I have provided or w	vill provide a statement that conduct of a trade or busin		• •			5	
Pa	rt IV Certification							
Unde	r penalties of perjury, I declar	e that I have examined the info	rmation on this form and to	the best of my	knowledge and	belief it is true,	correct, and complete. I	
	r certify under penalties of pentities of pentities of pentities of an	erjury that: authorized to sign for the bene	ficial owner) of all the incor	ne to which this	form relates			
2 The	beneficial owner is not a U.S	S. person,	,			o		
not s 4 For	ubject to tax under an income broker transactions or barter	elates is (a) not effectively conn- e tax treaty, or (c) the partner's exchanges, the beneficial own	share of a partnership's effective of a partnership's effective of a share of a partnership of the share of a	ectively connect son as defined ir	ed income, and the instructions	i.	-	
		to be provided to any withholdi burse or make payments of the				of which I am	the beneficial owner or	

Sign Here Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-YYYY) Capacity in which acting