



Department of Family Services

121 S Martin Luther King Blvd • Las Vegas NV 89106-4309
(702) 455-7200 • Fax (702) 385-2999 • Hotline (702) 399-0081

Lisa Ruiz-Lee, Director
Paula Hammack, Assistant Director • Michael Knight, Assistant Director

April 15, 2015

Dear Foster Care and Adoptive Parents:

Clark County is now offering Automatic ACH Check Processing for your monthly foster and/or adoptive care payments.

In order to qualify for this service, you must have:

- A checking or savings account in your name
- An E-Mail address (notifications and payment advices will be sent via email)

The enclosed forms must be completed, signed, and returned in order for your payment to be automatically deposited into your account. Be advised that this process may take up to two months. You will continue to receive a paper check until the process is completed. If you would like to take advantage of this service, please include all of the following:

- ACH Direct Deposit Enrollment Form
- Form W-9 Request for Taxpayer Identification Number and Certification (2 copies enclosed). **The Clark County Comptroller requires that one copy of this form be filled out for each individual licensed provider and adoptive parent per adoption agreement.** Foster Care payments are considered non-taxable income. Completion of this form will not affect this tax status.
- Voided Check or Deposit slip

All mandatory fields are highlighted. **Incomplete forms will be rejected** and returned to you to be revised. **Please submit completed forms to:**

Clark County Department of Family Services
Attention: DFS FISCAL SERVICES
121 S Martin Luther King Blvd
Las Vegas, NV 89106
DFSFiscalservices@ClarkCountyNV.gov
FAX: (702) 382-2004

If you have any questions concerning this process, please contact DFS Fiscal Services at (702) 455-4757.

Sincerely,

Julie Mondroski
Assistant Manager
DFS Fiscal Unit



OFFICE OF THE CLARK COUNTY COMPTROLLER

Jessica Colvin, Comptroller
 500 S Grand Central Pkwy PO Box 551210
 Las Vegas, NV 89155-120

**ACH Direct Deposit
 Enrollment Form**

Office Use Only	
Vendor # _____	
Regular _____	Unity _____

Name & Mailing Address:	Tax Identification Number (Attach a completed W-9 form)
	E-mail address (please print clearly):
Contact Name:	Daytime Phone:
Name of Financial Institution: (Item 3 below):	
Name(s) on Account: (Item 1 below):	
Routing Number: (Item 4 below)	Account Number: (Item 5 below)
Please Credit: <input type="checkbox"/> Checking account (attach voided check) <input type="checkbox"/> Savings account (attach deposit slip) (Select One)	

I hereby authorize the Clark County Comptroller's to deposit funds into my (our) account at the named financial institution for payment of accounts payable invoices/requests.

I understand and acknowledge the following:

- That I must notify Clark County Comptroller's office of any changes of the contact person and e mail address.
- That I must notify the Comptroller's Office in writing if I change financial institutions or if my account information changes.
- That the Direct Deposit will continue unless I notify the Comptroller's Office in writing to discontinue the program.
- That if this deposit is rejected by my financial institution, I may be excluded from further participation in the Direct Deposit program.

Signature _____

Date _____

1. Name(s) on account
2. Check number
3. Name of Financial Institution
4. Routing number
5. Account number

1	2	
Name of Depositor Street Address City, State, Zip		
	101	
	Date _____	
Pay to the Order of _____		
	_____ Dollars	
3	Name of Financial Institution	
For _____		
: 9999999999 : 012345678 101		
4	5	2

Please remember to sign above and attach voided check or savings deposit slip to form.

Request for Taxpayer Identification Number and Certification

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

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:

Individual/sole proprietor or single-member LLC
 C Corporation
 S Corporation
 Partnership
 Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
 Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) _____
 Requester's name and address (optional) _____

6 City, state, and ZIP code _____

7 List account number(s) here (optional) _____

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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or

Employer identification number

								-									
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Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ _____ Date ▶ _____

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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-DIV (dividends, including those from stocks or mutual funds)
- 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?* on page 2.*

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

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Social security number													
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3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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