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Withholding Exemption Certificate 2014

The payee completes this form and submits it to the withholding agent.

Withholding Agent (Type or print)

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	Address (apt./ste., room, PO Box, or PMB no.)	SSN OF ITINØFEIN□CA COPP NA □CA SOS Alle NO. 94 - 1156365
 Check only one reason box below that applies to the payee. By checking the appropriate box below, the Payee certifies the reason for the exemption from the California income tax withholding equirements on payment(s) made to the entity or individual. Individuals — Certification of Residency: I are a resident of California and I reside at the address shown above. If I become a nonresident at any time, I will promptly notify the withholding agent. See instructions for General Information D, Definitions. Corporations: The corporation has a permanent place of business in California. The corporation will file a California tax return. If this corporation ceases to have a permanent place of business in California. The corporation and is subject to the laws of California. The corporation ceases to have a permanent place of business in California tax and the address shown above or is registered with the California SOS, and is subject to the laws of California. The partnership or LLC has a permanent place of business in California tax and the address shown above or is registered with the California SOS, and is subject to the laws of California. The partnership or LLC will file a California tax return. If the partnership or LLC ceases to do any of the above, I will promptly inform the withholding agent. For withholding purposes, a limited liability partnership (LLP) is treated like any other partnership. Tax-Exempt Entities: The entity is exempt from tax under California Revenue and Taxation Code (R&TC) Section 23701 d. (insert letter) or internal Revenue Code Section 501(c) d. (insert number). If this sentity ceases to be exempt from tax, I will promptly notit the withholding agent. Individuals cannot be tax-exempt entities. Insurance Companies, Individual Retriement Arrangements (RAS), or Qualified Pension/Profit Sharing Plans: The entity is an insurance company. IRA, or a federally qualified pension or profit-sharing pl	City (If you have a foreign address, see instructions.)	
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	Payee's signature	Date <u>4-8-14</u>

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