

[Your Company Name]  
[Your Address]  
[City, State, Zip Code]  
[Date]

[Vendor Name]  
[Vendor Address]  
[City, State, Zip Code]

**Subject: Request for Taxpayer Identification Number and W-9 Form**

Dear [Contact Person Name or Accounts Receivable Department],

In order to comply with Internal Revenue Service (IRS) regulations, we are required to maintain a current Taxpayer Identification Number (TIN) on file for all our vendors to whom we make payments.

Please complete, sign, and return the enclosed IRS Form W-9 (Request for Taxpayer Identification Number and Certification). This information is necessary for us to accurately report payments made to you and to issue Form 1099-NEC or 1099-MISC at the end of the calendar year, if applicable.

Please provide the following information:

- Legal Business Name (as shown on your income tax return)
- Business Designation (e.g., Individual, Corporation, Partnership, or LLC)
- Federal Tax ID Number (FEIN) or Social Security Number (SSN)
- Complete Mailing Address

Please return the completed form by [Date] via email to [Email Address] or by mail to the address listed above.

Failure to provide this information may result in a mandatory backup withholding of federal income tax from future payments, as required by the IRS.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]  
[Your Title]  
[Your Phone Number]