

### Waste Management Community Benefits Request for Donations

The City of Riviera Beach, in conjunction with Waste Management Inc. of Florida, has established a Community Benefits Policy. Under the Policy each elected official shall be entitled to designate funds to support approved public projects for public purposes. Public purposes include, but are not limited to, charitable events, not-for-profit organizational events or programs and City functions or projects (which may include contributions to the City's Scholarship Fund or the City's Housing Trust Fund). All requests for donations must be presented to the City Council and approved by a majority of the City Council. The City will attempt to process all requests within fourteen (14) days of City Council approval.

**Ineligible uses** include the purchase of tables at events, campaign contributions, or payment for salaries or operational expenses. Funds cannot be used to cover an elected official's travel, meals, or for his or her personal benefit or gain or for the personal gain of relatives as defined by City Code, the Palm Beach County Code of Ethics or State Statutes, as applicable. Funds cannot be given to an entity/agency/organization for which the elected official is a director or officer.

Name of Elected Official Sponsoring Donation: Lynne L. Hubbard
Legal Name of Organization: Washington Elementary School
Program/ Activity Name: Educational Enhancements
Requested Amount: \$ 500.00
Briefly describe the Program/Activity below <u>and</u> attach (1) letter of request or a more detailed descriptio of the Program/Activity; (2) non-profit paperwork and (3) w-9 IRS form:
Students educational enhancement
Mailing Address: 1709 W. 30 <sup>th</sup> Street
City: Riviera Beach State: FL Zip: 33404
Contact Person(s): Sandra Edwards
Phone: <u>561-494-1200</u> Fax:
Email Address: sandra.edwards@palmbeachschools.org
Name of Authorized Official:Sandra Edwards
Signature of Authorized Official: _Sandra Edwards Date:11/20/17_
****Return the form to the Elected Official or the Legislative Office for processing

## Waste Management Community Benefits Request for Donations Approval by Elected Official

I, LYNNE L. HUBBARD, hereby certify that the donation to						
Washington Elementary School complies with the City's Community Benefits Policy. I further certify that: (1) I am not an officer, director, partner, proprietor, employee, subcontractor or agent of the organization, its parent organization or subsidiary and I do not have any contractual relationship with or other obligation to the organization, its parent organization or subsidiary; (2) I have no relatives or business associates (as those terms are defined in section 112.312, Florida Statutes) who are officers, directors, partners, proprietors, employees, subcontractors or agents of the organization, its parent organization or subsidiary; (3) The disbursement of the foregoing amount will not inure to my special gain or loss or to the special gain or loss of my relatives or my business associates; and (4) I am not aware of any conflict of interest the disbursement of the foregoing amount to the organization will create for the City of Riviera Beach or myself.  Signature of Elected Official:						
City Council Action						
Approved						

# Request for Taxpayer Identification Number and Certification

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

Department of the Treasury Internal Revenue Service						110 10			
1 Name (as shown on your income tax return). Name to required on this line; do no	not leava this line blank								
Palm Beach County School District									
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 Corporation S Corporation Partnership Trust/estate			slate	4 Exemptions (codes apply only to certain onlities, not individuals; see Instructions on page 3): Exempt payes code (if any)					
Limited liability company. Enter the tax classification (C=C corporation, S=S of				Exemption from FATCA reporting					
Single-member LLC			e above for code fil any)  Wester to eccount maintained cuts de the U.S.)						
								5 Address (number, street, and apt. or suite no.)	
3 3300 Forest Hill Blvd A 323									
6 City, state, and ZiP coda									
West Palm Beach, FL 33406									
7 List account number(s) here (optional)									
A CHARLES OF THE CONTROL OF THE CONT									
Part I Taxpayer Identification Number (TIN)  Enter your TIN in the appropriate box. The TIN provided must match the name	akes on the 1 to avok	л I Soi	cial sec	udty num	ber				
backup withholding. For individuals, this is generally your social security number	er (SSN). However, for			<del>Т</del> 'Г'	$\overline{\Box}$		Т		
resident alien, sole proprietor, or disreparded entity, see the Part I instructions	on page 3. For other	- 1		-		-			
entities, it is your employer identification number (ÉiN). If you do not have a number, see How to get a 7/IN on page 3.				J L		_			
Note. If the account is in more than one name, see the instructions for line i and the chart on page 4 for									
guidelines on whose number to enter.		5	9 .	6 0	0	0 7	8	3	
						Ш.	Ш		
Part II Certification									
Under penalties of perjury, I certify that:  1. The number shown on this form is my correct texpayer identification number.	v foe I om umiting for a	er reshoe te	n ha lee	ued to n	nal: a	nel			
							l Rev	entre	
<ol><li>1 am not subject to backup withholding because: (a) I am exempt from backup service (IRS) that I am subject to backup withholding as a result of a failure in longer subject to backup withholding; and</li></ol>	to report all interest or	dividends	s, or (c)	the IRS	has r	oliffed	me ti	nat I am	
<ol> <li>I am a U.S. citizen or other U.S. person (defined belovi); and</li> <li>The FATCA code(s) entered on this form (if any) indicating that I am exempt if</li> </ol>	from FATCA reporting	ls correct.							
Certification instructions. You must cross out item 2 above if you have been a because you have falled to report all interest and dividends on your tax return. I interest paid, acquisition or abandonment of secured property, cancellation of a generally, payments other than interest and dividends, you are not required to a instructions on page 3.	notified by the IRS that For real estate transact debt, contributions to a	t you are d ations, item an individu	currenti n 2 doe uat retir	s not app entent at	reng	or mor ement	igage (IRA).	end	
Sign   Signature of   Curcy   Signature of   Signature o	L, CPA Date	<u>»≻                                     </u>	7	16			,		
General instructions	<ul> <li>Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)</li> </ul>								
	Form 1999-C (canceled debt)     Form 1999-A (acquisition or abandonment of secured property)								
as (egisiation enacted after we release it) is at www.ks.gov/in9.	Use Form W-9 only if you are a U.S. person (including a resident allen), to provide your correct TIN.								
the pool of the state of the st	if you do not return For	m W-9 to U	he reque	sier with	TIN,	you mi	yhi bo	aub/ect	
which may be your social security number (SSN), individual taxpayer identification	to backup withholding. Se By signing the filled-out	ee What is t it form, you:	beckup ( :	vithholdin	37 on	page 2	•		
you, or other amount reportable on an information return. Examples of information	<ol> <li>Certify that the TIN ye to be issued),</li> <li>Certify that you are n</li> </ol>	-					TOF all	AUTHUR!	
returns include, but are not limited to, the following:  • Form 1099-INT (Interest earned or paid)	3. Claim exemplion from	m backup v	ulthhold	ing if you i	re a	U.S. ext	nipt p	ayee. If	
<ul> <li>Form 1098-DIV (dividends, including those from stocks or mutual funds)</li> </ul>	applicable, you are also cartifying that as a U.S. parson, your altocable share of any partnership income from a U.S. trade or business is not subject to the								
• Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)	withiotding tax on foreign partners' share of effectively connected income, and 4. Certify that FATCA code(s) entered on this form (if any) indicating that you we								
<ul> <li>Form 1099-B (slock or mutual fund sales and cartain other transactions by brokers)</li> </ul>	A CONTINUE CATER OF	coders) enie	red on l	rus Iorno (i	BITY)	Indicati	ոց տն	t you are	
Form 1099-S (proceeds from real estate transactions)	exempt from the FATCA r	reporting, is	correct	. See Whi	i is F	ATCA re	portin	g? on	



### Consumer's Certificate of Exemption

DR-14 R. 04/11

### Issued Pursuant to Chapter 212, Florida Statutes

85-8013897253C-1 11/30/2012 11/30/2017 COUNTY GOVERNMENT
Certificate Number Effective Date Expiration Date Exemption Category

This certifies that

PALM BEACH COUNTY SCHOOL BOARD 3366 FOREST HILL BLVD A 323 WEST PALM BEACH FL 33406-5870

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



### Important Information for Exempt Organizations

DR-14 R. 04/11

- 1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
- Your Consumer's Certificate of Exemption is to be used solely by your organization for your organization's customary nonprofit activities.
- Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
- 4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).
- 5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.
- 6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.