

## W-9 Directions for UHCPW program participants

Click on the link for the [W-9 Form \(illinois.gov\)](#)

Information on this form **must be typed (handwritten versions will not be accepted)**. This form is in PDF format and has the capacity for you to type information once you open the file.

Box 1, type your name (your name **must** match the name you used on your most recent income tax return). The Illinois Comptroller will reject the W-9 if your name does not match the name listed in the IRS' database. Notify our office if your name has changed since your most recent tax filing.

Box 2, leave blank

Box 3 is already complete

Box 4, leave blank

Box 5, type your mailing address (if your address on this form is different than the address we have in our UHCPW database, we will update the database to reflect this address).

Box 6, include your city, state, and zip code. The Illinois Comptroller requires your **nine-digit** zip code. The form will not be accepted if your nine-digit zip code is not provided. If you do not know your nine-digit zip code, go to this web site: [ZIP Code™ Lookup | USPS](#)

Box 7, leave blank

To the right of boxes 5, 6, and 7 is the "Requester's name and address". Leave this blank.

In Part 1, the form requires your Social Security Number (SSN). The form will not be accepted if your SSN is not provided.

Part 2 requests your signature. Your signature **must** be handwritten. Typed signatures cannot be accepted.

When completed and signed, upload the 1<sup>st</sup> page of the document (in PDF or JPEG format) to your application. Only the first page needs to be submitted. Do not send Pages 2-6 as these are directions and information for you.