

Name \_\_\_\_\_ CNB Account # \_\_\_\_\_

E-mail address \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

## 1. EXPENSE INFORMATION

Property Description: \_\_\_\_\_ Ownership % \_\_\_\_\_

### Expense Type:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Appliances/Furnishings | <input type="checkbox"/> Insurance                | <input type="checkbox"/> Property Taxes             |
| <input type="checkbox"/> Due Diligence Fee      | <input type="checkbox"/> Landscaping              | <input type="checkbox"/> Repairs                    |
| <input type="checkbox"/> HOA Payment            | <input type="checkbox"/> Loan Payment             | <input type="checkbox"/> Return of Security Deposit |
| <input type="checkbox"/> Inspection Fees        | <input type="checkbox"/> Property Management Fees | <input type="checkbox"/> Upgrade/Improvement        |
|   |   | <input type="checkbox"/> Utilities                  |
|   |   | <input type="checkbox"/> Other _____                |

Please attach invoice, etc. for the requested payment and fax to 785-336-2214 or e-mail to us at: [realestate@cnbcustody.com](mailto:realestate@cnbcustody.com)

## 2. PAYMENT OPTIONS

Send One Time Only: Send \$ \_\_\_\_\_ ☐ Send Immediately or ☐ Send On \_\_\_\_/\_\_\_\_/\_\_\_\_

Establish/Update Recurring Schedule: Send \$ \_\_\_\_\_ or ☐ Send As Invoiced (Apx. Amt \$ \_\_\_\_\_)

Beginning Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

Stop the Recurring Payment: ☐

**Note:** If cash is not available at the time of the requested payment, CNB will not send the payment until cash becomes available. Recurring payments will end when we receive instructions to stop the payment or the property has been sold.

## 3. METHOD OF PAYMENT A W-9 may be required for 1099-NEC reporting purposes before payment will be made.

- ☐ **Check** – CNB will make check payable as instructed in Section 3 below.
- ☐ Send by First Class U.S. mail ☐ Send by U.S. Priority Mail – bill \$10 fee to my account ☐ Send by U.S. Priority Mail Express – bill \$35 fee to my account
- ☐ Please send overnight: ☐ Federal Express Billing # \_\_\_\_\_ ☐ UPS Billing # \_\_\_\_\_

**Note:** If billing number is not provided, CNB will bill the special mailing fee of \$35 to your account.

☐ **Wire** – CNB will wire funds as instructed in Section 5 below. I understand a \$30 wire fee will be deducted from my account.

## 4. ADDRESS FOR PAYMENT BY CHECK

Make Check Payable To \_\_\_\_\_ Account # \_\_\_\_\_

Mail Check To \_\_\_\_\_ Payee Phone # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Check Memo Documentation \_\_\_\_\_

## 5. WIRE INSTRUCTIONS

The undersigned originator requests payment to be made to the firm shown on the attached invoice and the account number below. To the extent not prohibited by law, the undersigned agrees that this wire transfer is irrevocable and that the sole obligation of CNB is to exercise ordinary care in processing this wire transfer and that it is not responsible for any losses or delays which occur as a result of any other party's involvement in processing this transfer.

Name on Bank Account \_\_\_\_\_ Bank Account # \_\_\_\_\_

Bank Name \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ ABA Routing # \_\_\_\_\_

**Note:** If a wire is rejected due to incorrect wire instructions, CNB may charge additional wire fees.

## 6. SIGNATURE

I acknowledge that Community National Bank ("CNB") is not responsible for notifying me of any payments due, and that it is my responsibility to provide in writing any direction to make such payments, including modifications to previous directions. I understand that I am responsible for reviewing account statements to ensure that proper payments have been made according to my direction. I understand that CNB has no authorization to make any modifications to any directions submitted without my authorization. I acknowledge that it is my sole responsibility to ensure there are sufficient funds within the account to make directed payments and any late fees resulting from insufficient funds or incomplete instructions are my responsibility.

I acknowledge and represent that the payment directed above was incurred by this account and that the account is only paying it's portion of the expense. Any person or entity that has provided services to this account is an unrelated third-party and not a disqualified person as defined by the Internal Revenue Code Section 4975. I understand the prohibited transaction rules under IRS section 4975 and payment does not constitute a prohibited transaction. I acknowledge that no portion of the directed payment will be used to reimburse myself for any expenses paid out of pocket.

I hereby direct CNB to disburse the cash funds in my account according to the information and instructions above. I understand that I must request this payment to be made with sufficient notice to CNB to meet invoice due dates and that CNB will not be liable for any late payments due to delayed mail service. I hereby indemnify CNB and hold it harmless from any liabilities, claims, taxes, causes of actions, etc. to which I may be subjected because of this payment or any other activity in my account. I further acknowledge that the transaction directed above, as well as all other activities associated with this account, are governed by the Custodial Agreement.

X \_\_\_\_\_ Signature of Account Owner or Authorized Party on File \_\_\_\_\_ Date \_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

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

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

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 of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <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) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions.	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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

## Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
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.

**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 for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## 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, later.*