

DATE: 7/29/2020

INVITATION TO BID
THIS IS NOT AN ORDER

Page: 1

BID NO.: 50-00131834

JEFFERSON PARISH
PURCHASING DEPARTMENT
P.O. BOX 9
GRETN, LA. 70054-0009
504-364-2678

VENDOR: [Nationwide Medical Surgical Inc](#)

BUYER: MBUTTERY@jeffparish.net

Bids will be received until 11:00 AM, 8/05/2020 via online at www.jeffparishbids.net or by hand delivery, USPS mail or other courier service to Purchasing Department, 200 Derbigny Street (General Government Building), Suite 4400, Gretna, LA 70053. For convenience, bidders may also submit bids in the East Bank Purchasing Department, Suite 404, Jefferson Parish Joseph S. Yenni Building, 1221 Elmwood Park Blvd., Jefferson LA 70123. However, if submitting bids on the day of bid opening, bidders must submit at the West Bank location only.

All bids submitted are subject to these instructions and general conditions and any special conditions and specifications contained herein, all of which are made part of this bid proposal reference. By submitting a bid, vendor agrees to comply with all provisions of Louisiana Law, as well be in compliance with the Jefferson Parish Code of Ordinances, Louisiana Code of Ethics, applicable Jefferson Parish ethical standards and Jefferson Parish Resolution No. 113646 and/or Resolution No. 113647. A copy of these resolutions may be obtained from the Office of the Parish Clerk, Suite 6700, Jefferson Parish General Government Building, 200 Derbigny Street, Gretna, LA 70053. You may also obtain a copy by visiting the Purchasing Department webpage at purchasing.jeffparish.net and clicking on On-line forms.

All vendors submitting bids should register as a Jefferson Parish vendor if not already yet registered. Registration forms may be downloaded from <http://purchasing.jeffparish.net> and by clicking on Vendor Information. Current W-9 forms with respective Tax Identification numbers and vendor applications may be submitted at any time; however, if your company is not registered and/or a current W-9 form is not on file, vendor registration is mandatory. Vendors may experience a delay in payment if your company is not a registered vendor with Jefferson Parish.

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Delivered, anywhere within the Parish as designated by the Purchasing Department. JEFFERSON PARISH WILL ACCEPT ONE BID ONLY FROM EACH VENDOR. Items bid must meet specifications. JEFFERSON PARISH will accept one price for each item unless otherwise indicated. Two or more prices for one item will result in bid rejection. Bidders are required to complete, sign and return the bid form and/or complete and return the associated line item pricing forms as indicated. The price quoted for work shall be stated in figures. In the event there is a difference in unit prices and totals, the unit prices shall prevail.

JEFFERSON PARISH reserves the right to award contracts or place orders on a lump sum or individual item basis, or such combination, as shall in its judgment be in the best interest of JEFFERSON PARISH. Every contract or order shall be awarded to the LOWEST RESPONSIVE and RESPONSIBLE BIDDER, taking into consideration the CONFORMITY WITH THE SPECIFICATIONS and the DELIVERY AND/OR COMPLETION DATE

PROTESTS: Only those vendors that submit bids in response to this solicitation may protest any element of the procurement, in writing to the Director of the Purchasing Department. Written protest must be received within 48 hours of the release of the bid tabulation by the Purchasing Department. After consultation, the Parish Attorney's Office will then respond to protests in writing. (For more information, please see Chapter 2, Article VII, Division 2, Sec. 2-914.1 of the Jefferson Parish Code of Ordinances.)

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in the quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH requires all products to be new (current) and all work must be performed according to standard practices for the project. Unless otherwise specified, no aftermarket parts will be accepted. Unless otherwise specified, all workmanship and materials must have at least one (1) year warranty, in writing, from the date of delivery and/or acceptance of the project. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

If this bid requires a pre-bid conference (see Additional Requirements section), bidders are advised that such conference will be held to allow bidders the opportunity to identify any discrepancies in the bid specifications and seek further clarification regarding instructions. The Purchasing Department will issue a written response to bidders' questions in the form of an Addendum.

All formal Addenda require written acknowledgment on the bid form by the bidder. Failure to acknowledge an Addendum on the bid form shall cause the bid to be rejected; JEFFERSON PARISH reserves the right to award bid to next lowest responsive and responsible bidder in this event.

USE OF BRAND NAMES AND STOCK NUMBERS: Where brand names and stock numbers are specified, it is for the purpose of establishing certain minimum standards of quality. Bids may be submitted for products of equal quality, provided brand names and stock numbers are specified. Complete product data may be required prior to award.

Quantities listed are for bidding purposes only. Actual requirements may be more or less than quantities listed.

Bidders are not to exclude from participation in, deny the benefits of, or subject to discrimination under any program or activity, any person in the United States on the grounds of race, color, national origin, or sex; nor discriminate on the basis of age under the Age Discrimination Act of 1975, or with respect to an otherwise qualified handicapped individual as provided in Section 504 of the Rehabilitation Act of 1973, or on the basis of religion, except that any exemption from such prohibition against discrimination on the basis of religion as provided in the Civil Rights Act of 1964, or Title VI and VII of the Act of April 11, 1968, shall also apply. This assurance includes compliance with the administrative requirements of the Revenue Sharing final handicapped discrimination provisions contained in Section 51.55 (c), (d), (e), and (k)(5) of the Regulations. New construction or renovation projects must comply with Section 504 of the 1973 Rehabilitation Act, as amended, in accordance with the American National Standard Institute's specifications (ANSI A17.1-1961).

Jefferson Parish and its partners as the recipients of federal funds are fully committed to awarding a contract(s) to firm(s) that will provide high quality services and that are dedicated to diversity and to containing costs. Thus, Jefferson Parish strongly encourages the involvement of minority and/or woman-owned business enterprises (DBE's, including MBE's, WBE's and SBE's) to stimulate participation in procurement and assistance programs.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS**IN ACCORDANCE WITH STATE REGULATIONS JEFFERSON PARISH OFFERS ELECTRONIC PROCUREMENT TO ALL VENDORS**

This electronic procurement system allows vendors the convenience of reviewing and submitting bids online. This is a secure site and authorized personnel have limited read access only. Bidders are encouraged to submit electronically using this free service; while the website accepts various file types, one single PDF file containing all appropriate and required bid documents is preferred. Bidders submitting uploaded images of bid responses are solely responsible for clarity. If uploaded images/documents are not legible, then bidder's submission will be rejected. Please note all requirements contained in this bid package for electronic bid submission.

Please visit our E-Procurement Page at www.jeffparishbids.net to register and view Jefferson Parish solicitations. For more information, please visit the Purchasing Department page at <http://purchasing.jeffparish.net>.

ADDITIONAL REQUIREMENTS FOR THIS BID

PLEASE MATCH THE NUMBERS PRINTED IN THIS BOX WITH THE
CORRESPONDING INSTRUCTIONS BELOW.

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1. All bidders must attend the MANDATORY pre-bid conference and will be required to sign in and out as evidence of attendance. In accordance with LSA R.S. 38:2212(I), all prospective bidders shall be present at the beginning of the MANDATORY pre-bid conference and shall remain in attendance for the duration of the conference. Any prospective bidder who fails to attend the conference or remain for the duration shall be prohibited from submitting a bid for the project.
2. Attendance to this pre-bid conference is optional. However, failure to attend the pre-bid conference shall not relieve the bidder of responsibility for information discussed at the conference. Furthermore, failure to attend the pre-bid conference and inspection does not relieve the successful bidder from the necessity of furnishing materials or performing any work that may be required to complete the work in accordance with the specification with no additional cost to the owner.
3. Contractor must hold current applicable JEFFERSON PARISH licenses with the Department of Inspection and Code Enforcement. Contractor shall obtain any and all permits required by the JEFFERSON PARISH Department of Inspection and Code Enforcement. The contractor shall be responsible for the payment of these permits. All permits must be obtained prior to the start of the project. Contractor must also hold any and all applicable Federal and State licenses. Contractor shall be responsible for the payment of these permits and shall obtain them prior to the start of the project.
4. A LA State Contractor's License will be required in accordance with LSA R.S. 37-2150 et. seq. and such license number will be shown on the outside of the bid envelope. Failure to comply will cause the bid to be rejected. Additionally if submitting the bid electronically, then the license number must be entered in the appropriate field in the Electronic Procurement system. Failure to comply will cause the bid to be rejected.
5. It is the bidder's responsibility to visit the job site and evaluate the job before submitting a bid.
6. Job site must be clean and free of all litter and debris daily and upon completion of the contract. Passageways must be kept clean and free of material, equipment, and debris at all times. Flammable material must be removed from the job site daily because storage will not be permitted on the premises. Precautions must be exercised at all times to safeguard the welfare of JEFFERSON PARISH and the general public.

INSTRUCTIONS FOR BIDDERS AND GENERAL CONDITIONS

7. **PUBLIC WORKS BIDS:** All awards for public works in excess of \$5,000.00 will be reduced to a formal contract which shall be recorded at the contractor's expense with the Clerk of Court and Ex-Officio Recorder of Mortgages for the Parish of Jefferson. A price list of recordation costs may be obtained from the Clerk of Court and Ex-Officio Recorder of Mortgages for the Parish of Jefferson. All awards in excess of \$25,000.00 will require both a performance and a payment bond. Unless otherwise stated in the bid specifications, the performance bond requirements shall be 100% of the contract price. Unless otherwise state in the bid specifications, the payment bond requirements shall be 100% of the contract price. Both bonds shall be supplied at the signing of the contract.
8. **NON-PUBLIC WORKS BIDS:** A performance bond will be required for this bid. The amount of the bond will be 100% of the contract price unless otherwise indicated in the specifications. The performance bond shall be supplied at the signing of the contract.
9. **NON-PUBLIC WORKS BIDS:** A payment bond will be required for this bid. The amount of the bond will be 100% of the contract price unless otherwise indicated in the specifications. The payment bond shall be supplied at the signing of the contract.
10. All bidders must comply with the requirements stated in the attached "Standard Insurance Requirements" sheet attached to this bid solicitation. Failure to comply with this instruction will result in bid rejection.
11. A bid bond will be required with bid submission in the amount of 5% of the total bid, unless otherwise stated in the bid specifications. Acceptable forms shall be limited to cashier's check, certified check, or surety bid bond. All sureties must be in original format (no copies). If submitting a bid online, vendors must submit an electronic bid bond through the respective online clearinghouse bond management system(s) as indicated in the electronic bid solicitation on Central Auction House. No scanned paper copies of any bid bond will be accepted as part of the electronic bid submission.
12. This is a requirements contract to be provided on an as needed basis. JEFFERSON PARISH makes no representations on warranties with regard to minimum guaranteed quantities unless otherwise stated in the bid specifications.
13. Freight charges should be included in total cost when quoting. If not quoted FOB DELIVERED, freight must be quoted as a separate item. Bid may be rejected if not quoted FOB DELIVERED or if freight charges are not indicated on bid form.
14. **PUBLIC WORKS BIDS - Completed, Signed and Properly Notarized Affidavits Required;** This applies to all solicitations for construction, alteration or demolition of public buildings or projects, in conformity with the provisions contained in LSA-RS 38:2212.9, LSA-RS 38:2212.10, LSA-RS 38:2224, and Sec 2-923.1 of the Jefferson Parish Code of Ordinances. For bidding purposes, all bidders must submit with bid submission COMPLETED, SIGNED and PROPERLY NOTARIZED Affidavits, including: Non-Conviction Affidavit, Non-Collusion Affidavit, Campaign Contribution Affidavit, Debt Disclosures Affidavit and E-Verify Affidavit. For the convenience of vendors, all affidavits have been combined into one form entitled PUBLIC WORKS BID AFFIDAVIT. This affidavit must be submitted in its original format, and without material alteration, in order to be compliant and for the bid to be considered responsive. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid, however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.
15. **NON PUBLIC WORK BIDS - Completed, Signed and Properly Notarized Affidavits Required** in conformity with the provisions contained in LSA – RS 38:2224 and Sec 2-923.1 of the Jefferson Parish Code of Ordinances. For bidding purposes, all bidders must submit with bid submission COMPLETED, SIGNED and PROPERLY NOTARIZED Affidavits, including: Non-Collusion Affidavit, Debt Disclosures Affidavit and Campaign Contribution Affidavit. For the convenience of vendors, all affidavits have been combined into one form entitled NON PUBLIC WORKS BID AFFIDAVIT. This affidavit must be submitted in its original format, and without material alteration, in order to be compliant and for the bid to be considered responsive. A scanned copy of the completed, signed and properly notarized affidavit may be submitted with the bid, however, the successful bidder must submit the original affidavit in its original format and without material alteration upon contract execution. Failure to comply will result in the bid submission being rejected as non-responsive. The Parish reserves the right to award bid to the next lowest responsive and responsible bidder in this event.
16. The ensuing contract for this bid solicitation may be eligible for FEMA reimbursement and/or Federal funding/reimbursement. As such, the referenced appendix will be applicable accordingly and shall be considered a part of the bid documents. All applicable certifications must be duly completed, signed and submitted with bid submission. Failure to submit applicable certifications with bid submission will result in bid rejection.

It shall be the duty of every parish officer, employee, department, agency, special district, board, and commission: and the duty of every contractor, subcontractor, and licensee of the parish, and the duty of every applicant for certification of eligibility for a parish contract or program, to cooperate with the Inspector General in any investigation, audit, inspection, performance review, or hearing pursuant to JPCO 2-155.10(19). By signing this document, every corporation, partnership, or person contracting with PARISH, whether by cooperative endeavor, intergovernmental agreement, bid, proposal, application or solicitation for a parish contract, and every application for certification of eligibility for a parish contract or program, attests that it understands and will abide by all provisions of JPCO 2-155.10.

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BID NO.: 50-00131834

JEFFERSON PARISH

PURCHASING DEPARTMENT
P.O. BOX 9
GRETNA, LA. 70054-0009
504-364-2678

VENDOR: Nationwide Medical Surgical Inc

BUYER: MBUTTERY

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

Full Inventory Currently Available
May Ship from California Immediately

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

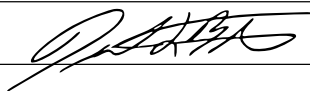
NUMBER: _____

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) _____

***** ALL BIDDERS MUST COMPLETE SECTION BELOW *****

FIRM NAME: Nationwide Medical Surgical Inc

SIGNATURE:
(Must be signed here)



TITLE: CEO / President

PRINT OR TYPE NAME:

Daniel Blatt

ADDRESS:

14141 Covello St., Building 6C

CITY, STATE:

Van Nuys, CA 91405

ZIP:

TELEPHONE:

() 818-997-8848 / Fax: 818-997-8850 ()

FAX:

EMAIL ADDRESS:

dblatt@nmsincusa.com

TOTAL PRICE OF ALL BID ITEMS: \$ \$3,000.00

Vendor:
Nationwide Medical Surgical Inc

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	20,000.00	EA	<p>PURCHASE OF SURGICAL MASKS FOR THE DEPARTMENT OF PARKS AND RECREATION</p> <p>0010 SURGICAL MASKS ITEM #MFB-3-EL</p> <p>3 PLY FACE MASKS (PLEATED) WITH EAR LOOPS SPUN BOUNDED POLYPROPYLENE 99.5% BACTERIAL FILTRATION FROM HARMFUL CONTAMINANTS IN AIR ANTI-FOG SWEAT BAND ACROSS BRIDGE OF NOSE ONE SIZE FITS ALL LIGHT BLUE 50/BOX; 20 BOX/CS</p> <p>ADENNA FEL110B-N PK 20/50'S CASE</p>	\$0.15	\$3,000.00



**LICENSES ISSUED TO:
NATIONWIDE MEDICAL/SURGICAL, INC.
14141 Covello St. Bldg 6C, Van Nuys, CA 91405**

DEA Registration Number: RN0371269 Exp: 10/31/2020

State Licenses						
State	Issuing Agency	Type of License	License No.	Exp. Date	Control Sub No.	Exp. Date
Alabama	Board of Pharmacy	Wholesaler/Distributor	192736	12/31/2020	Same	12/31/2020
Alaska	Dept of Econ Dev	Wholesaler/Distributor	295585	12/31/2020		
Arizona	Board of Pharmacy	Wholesaler/Distributor	W001576	10/31/2020		
Arkansas	Board of Pharmacy	Wholesaler/Distributor	WD02473	12/31/2020		
California	Board of Pharmacy	Wholesaler/Distributor	WLS 6076	7/1/2021		
Colorado	Dept of Reg Agencies	Wholesaler/Distributor	WHO.0007387	10/31/2020		
Connecticut	Dept of Consumer	Wholesaler/Distributor	CSW.0001447	6/30/2021	Same	6/30/2021
Delaware	Div of Professional Reg	Wholesaler/Distributor	A4-0001186	9/30/2020	DS0471	6/30/2021
District of Columbia	Dept of Health	Wholesaler/Distributor	DM1101325	12/31/2020	CF1100872	12/31/2021
Florida	Dept of Health	Wholesaler/Distributor	232313	7/31/2022	8811194	No Exp
Georgia	Board of Pharmacy	Wholesaler/Distributor	PHWH001716	6/30/2021		
Hawaii	Dept of Public Safety	Wholesaler/Distributor	N/A	N/A	E08715	10/31/2020
Idaho	Board of Pharmacy	Wholesaler/Distributor	W3109	12/31/2020	Same	12/31/2020
Illinois	Dept of Professional Reg	Wholesaler/Distributor	004-001819	12/31/2020	304-006696	12/31/2020
Indiana	Board of Pharmacy	Wholesaler/Distributor	48000932A	9/30/2020		
Iowa	Board of Pharmacy	Wholesaler/Distributor	6154	12/31/2020	2210327	12/31/2021
Kansas	Board of Pharmacy	Wholesaler/Distributor	5-01746	6/30/2021	Same	6/30/2021
Kentucky	Board of Pharmacy	Wholesaler/Distributor	W02196	9/30/2020		
Louisiana	Board of Wholesale Distr	Wholesaler/Distributor	5786	12/31/2020	35087	12/28/2020
Maine	Board of Pharmacy	Wholesaler/Distributor	WH70001441	12/31/2020		
Maryland	Board of Pharmacy	Wholesaler/Distributor	D02274	5/31/2021	270965	12/31/2020
Michigan	Board of Pharmacy	Wholesaler/Distributor	5306002732	7/25/2021	5315037999	7/25/2021
Minnesota	Board of Pharmacy	Wholesaler/Distributor	361302	5/31/2021		
Mississippi	Board of Pharmacy	Wholesaler/Distributor	16012/ 16.5a	12/31/2020	CS-16012/ 16.5a	12/31/2020
Missouri	Board of Pharmacy	Wholesaler/Distributor	2008004195	10/31/2021		
Montana	Board of Pharmacy	Wholesaler/Distributor	PHA-WDD-LIC-1542	11/30/2020		
Nebraska	Board of Pharmacy	Wholesaler/Distributor	524	7/1/2021		
Nevada	Board of Pharmacy	Wholesaler/Distributor	WH01137	10/31/2020	Same	10/31/2020
New Hampshire	Board of Pharmacy	Wholesaler/Distributor	4243	6/30/2022		
New Jersey	NJ Dept of Health	Wholesaler/Distributor	5004467	1/31/2021		
New Mexico	Board of Pharmacy	Wholesaler/Distributor	WD00010795	12/31/2021	CS00213313	10/31/2020
New York	Board of Pharmacy	Wholesaler/Distributor	025970	3/31/2021	02A0876	7/27/2022
North Carolina	Dept of Agriculture	Wholesaler/Distributor	164	12/31/2020		
Ohio	Board of Pharmacy	Wholesaler/Distributor	011159850-03	6/30/2021	Same	6/30/2021
Oklahoma	Board of Pharmacy	Wholesaler/Distributor	88-W-1832	7/31/2021	Same	7/31/2021
Oregon	Board of Pharmacy	Wholesaler/Distributor	W1-0002364-CS	9/30/2020		
Pennsylvania	Dept of Health	Wholesaler/Distributor	8000001839	5/31/2021	3000008154	5/31/2021
Rhode Island	Board of Pharmacy	Wholesaler/Distributor	DIS01800	9/30/2020	Same	9/30/2020
South Carolina	Board of Pharmacy	Wholesaler/Distributor	10384	6/30/2021		
South Dakota	Board of Pharmacy	Wholesaler/Distributor	600-0786	12/31/2020	RN0371269SD	10/31/2020
Tennessee	Board of Pharmacy	Wholesaler/Distributor	0000002025	8/31/2021		
Texas	Dept of Health	Wholesaler/Distributor	0063594	8/17/2020		
Utah	Div of Occup & Prof	Wholesaler/Distributor	9360079-1710	9/30/2021	9360079-8913	9/30/2021
Vermont	Board of Pharmacy	Wholesaler/Distributor	039.0001212	7/31/2021		
Virginia	Board of Pharmacy	Wholesaler/Distributor	0219000107	2/28/2021		
Washington	Health Professions Q A	Wholesaler/Distributor	FX00059339	9/30/2020	Same	9/30/2020
West Virginia	Board of Pharmacy	Wholesaler/Distributor	WD0557982	6/30/2021	Same	6/30/2021
Wisconsin	Dept of Reg & Licensing	Wholesaler/Distributor	1610-45	5/31/2022		
Wyoming	Board of Pharmacy	Wholesaler/Distributor	1058	6/30/2021	0608NMI09	6/30/2021



3-Ply Disposable Face Masks

FDA-Certified

Fujian Tianqing Medical Technology Co., Ltd
(GPO QARA Validated)

3-Ply Disposable Face Masks (Tianqing)

2

Product Details

Specifications

Device#:	D388255
Product Codes:	QKR
510(k):	N/A
Color:	Medical Blue
Top:	20 GSM Non-Woven Spunbond
Middle:	25 GSM Melt-blown
Bottom:	25 GSM Non-Woven Spunbond
BFE:	95.60%
PFE:	81.50%
Testing Standard:	YY0469-2011

Shipping Info

Masks/Bag:	50 masks per vacuum-sealed bag
Bags/Carton:	50 vacuum-sealed bags per carton
Masks/Carton:	2500 in a carton
Carton Dimensions:	L*W*H (CM) = 53.5*40*33.5



3-Ply Disposable Face Masks (Tianqing) - Certifications

3

Certificate of Conformity
NO.: 10068368

This is certifies that:

Applicant : FUJIAN TIANQING MEDICAL TECHNOLOGY CO., LTD.
Address : No. 63, Xiaoban, Futie Village, Kangmei Town, Nan'an City
Quanzhou, Fujian, 362300, CHINA

Manufacturer : FUJIAN TIANQING MEDICAL TECHNOLOGY CO., LTD.
Address : No. 63, Xiaoban, Futie Village, Kangmei Town, Nan'an City
Quanzhou, Fujian, 362300, CHINA

Device Listing : D388255 Face mask (except N95 respirator) for general
public/healthcare personnel per IIE guidance)

EUT : Disposable Face Mask, Disposable surgical mask, KN95 Mask

Models : Non-sterile ear-hanging mask, ASEPTEC ear-hanging respirator

Test Standard : Food and Drug Administration Regulation

This certificate is affirms that the above stated facility is registered with the U.S. Food and Drug Administration pursuant to the Federal Food Drug and Cosmetic Act, such registration having been verified as effective by Shenzhen Monika Technology Co., Ltd as of the date hereof, and Shenzhen Monika Technology Co., Ltd will confirm that such registration remains effective upon request and presentation of this certificate until December 31, 2020. Registration information can be found on the FDA website, it can be found by enter the company name, registration number, administrator number, product model, etc. The website is <https://www.accessdata.fda.gov/cdrh/cdrhdevices.cfm>

FDA

Shenzhen MONIKA Technology Co., Ltd
Building A, B, Baimen Science & Technology Park, Baimen Road, Baimen Street, Baimen District, Shenzhen, Guangdong, China
Tel: 0755-22541660
www.monika.com.cn

MONIKA Technology Co., Ltd
EST. 2010

Tianqing FDA Certificate

International Certification Registrar

Certificate

No. ICR Polska/M9105620

Name and address of certificate owner:
Fujian tianqing medical technology co. LTD
No.63, losaka, futie village, kangmei town, nanan city, quanzhou city, fujian province

Name and address of manufacturer:
Fujian tianqing medical technology co. LTD
No.63, losaka, futie village, kangmei town, nanan city, quanzhou city, fujian province

Product type:
Disposable daily respirator

Product types:
TIANQING-001.TIANQING-002.TIANQING-003.TIANQING-004.TIANQING-005.TIANQING-006.TIANQING-007.TIANQING-008.TIANQING-009.TIANQING-010

This certificate confirms that the product meets the requirements of the following standards of Regulation 2016/425
EN 149:2001+A1:2009

The certification process has been carried out in accordance with the program PC-P-07-07. Evaluation has been carried out in accordance with test reports made by European Quality Test Co., LTD.

No. of test reports:
LW-010315004-P

Certificate issue date:
24.03.2020

Expiration date:
23.03.2025

The mutual obligations and rights of the certification are regulated by the contract No. ICR Polska/2020-9156.

This certificate applies to products having the same attributes (parameters), intended use, that have been evaluated and meet the requirements of the aforementioned standards.





ICR




Director: Rafal Kalinowski
Warsaw, 24.03.2020

ICR Polska Co. Ltd.
ul. Plac Prymiera 6, 03-944 Warszawa
www.icrpolska.com, e-mail: icrpolska@icrqa.com

Tianqing CE Certificate

3-Ply Disposable Face Masks (Tianqing) - Certifications

<div>    </div>				<div>  <div> <p>扫描下载报告</p> <p>报告来源地址: www.gttc.net.cn 报告编号: GTTGP-2404-04</p> </div> </div>			
<div> <h1>检验检测报告</h1> <p>(电子版)</p> <p>委托单位: No: 2000083500</p> <p>地址: 福建省泉州市南安市梅溪美南国际村小坂C3号</p> </div>				<div> <p>委托单位</p> <p>品名: 50个</p> </div>			
<div> <p>样品信息</p> <p>口罩</p> </div>				<div> <p>样品名称: 委托检测</p> <p>样品受理/测试开始日期: 2020-04-03</p> <p>报告签发日期: 2020-04-09</p> </div>			
<div> <p>判定依据</p> <p>1/CNCA 7-2019 《普通防护口罩》</p> </div>				<div> <p>判定依据</p> <p>1/CNCA 7-2019</p> <p>1/CNCA 7-2019</p> <p>1/CNCA 7-2019</p> </div>			
<div> <p>综合检验结论</p> <p>—</p> </div>				<div> <p>判定结果</p> <p>符合</p> <p>符合</p> <p>符合</p> </div>			
<div> <p>备注</p> <p>本报告中检验检测项目均在现场按照标准规定的环境条件下进行(有注明除外)。</p> <p>本报告检验检测地址为广州市番禺区钱江路1号。</p> </div>				<div> <p>签发: 廖立强 工程师</p> <p>审核: 何</p> </div>			

检验检测报告附页

(电子章)

No.: 2020063590

共3页 第3页

检验检测项目 (计量单位)	测试方法	标准值及允差	检验检测结果	判定	备注
● 耐盐雾腐蚀率 (%)	GB 4682-2011 附录B 试验液配制: 55.58g 已重量的硫酸XTC 溶于蒸馏水: 4000ml 试体面积: 平均圆直径: 3.0um 1.5 × 1.5mm 1.5 × 1.5mm CFI 即性质量比:	≥95	DPF ₁ 95.5 DPF ₂ 95.8 DPF ₃ 95.5	符合	
● 粉尘过滤效率 (%)	GB 4682-2011 5.6.2 1. 气体流量: 30L/min 2. 粉尘浓度: 100mg/m ³ 3. 进气温度: 23℃ 4. 相对湿度: 36.0%	≥90	最小值 81.5	符合	
● 透气阻力(Pa)	GB 4682-2011 5.6.3 1. 气体流量: 30L/min 2. 进气浓度: 100mg/m ³ 3. 进气温度: 23℃ 4. 相对湿度: 36.0%	≤80	最大值 28.4	符合	

备注: 判定指标来源于客户要求的团体标准 T/CCTA T-2019。我单位获CNAS认定授权的检验能力范围 T/CCTA T-2019所标项目。

注

——本报告结束——

地址: 广州市海珠区新涌沙路1号
 总部电话: 020-37721151
 总部邮箱: 广州地区市场拓展部@yueshi.com

电话: 020-61945666/61945699
 电话: 020-37721151

3-Ply Disposable Face Masks (Tianqing) - Certifications





检验检测报告

TESTING REPORT

委托单位: ZKHJHS122003041
委托单位: 福建省天庆医疗科技有限公司
样品名称: 一次性使用口罩
报告日期: 2020-03-20

地址(Add): 福建省泉州市洛江区河市镇梧林村新街79号(Nc78 Xicun, Fujiao Village, Heheli Town, Lujiang District, Quanzhou City, Fujian Province)
电话(Tel): 0595-26503088 邮编(Postal Code): 362011 电子邮箱(E-mail): 196503652@qq.com



声明

STATEMENT

一、报告文本如需“检测专用章”无效，造成无效。
This report is invalid without "special test stamp" of our laboratory and invalid if altered.

二、复制报告文本需知成本式收费“检测专用章”无效。
The copy of this report is invalid without a new "special test stamp" of our laboratory.



三、报告无编制、审核及批准人签字无效。
This report is invalid without the signature of the Prepared, Audited and approved.

四、委托单位对本报表有异议，应在收到检测报告之日起十五日内向本实验室提出。
If there is any objection for test result, please raise it to our laboratory within 15 days from receiving this test report.

五、对客户出具的检测报告(检测)如有异议，承担检测费用和责任，需知人不
得擅自删除检测报告数据或进行修改。
The test results shown in this report is only applicable for the samples supplied directly by the customer, the customer shall not propagate or modify the data without permission by our laboratory.

六、本实验室接受委托检测，需大特检测，生产单位及检测机构的相关信息是基本实验
常确认，但不承担检测结果的法律责任。
If report is for special circumstances, the information of producer and samples is not guaranteed by our laboratory, the customer is responsible for the truth of the samples.

七、检测报告报告中，必须以实验室能力范围为准，对社会不具任何参考价值。
The items of this report out of laboratory certification scope does not serve as a proof for society.





检验检测报告

TESTING REPORT

名称: 福建省天庆医疗科技有限公司
地址: 福建省泉州市洛江区河市镇梧林村新街79号
委托单位: 福建省天庆医疗科技有限公司
样品名称: 一次性使用口罩
规格型号: 90片包
生产日期: 2020.03.12
检验日期: 2020.03.20

检验结果: 合格
检验结论: 合格
检验日期: 2020.03.20



检验检测报告

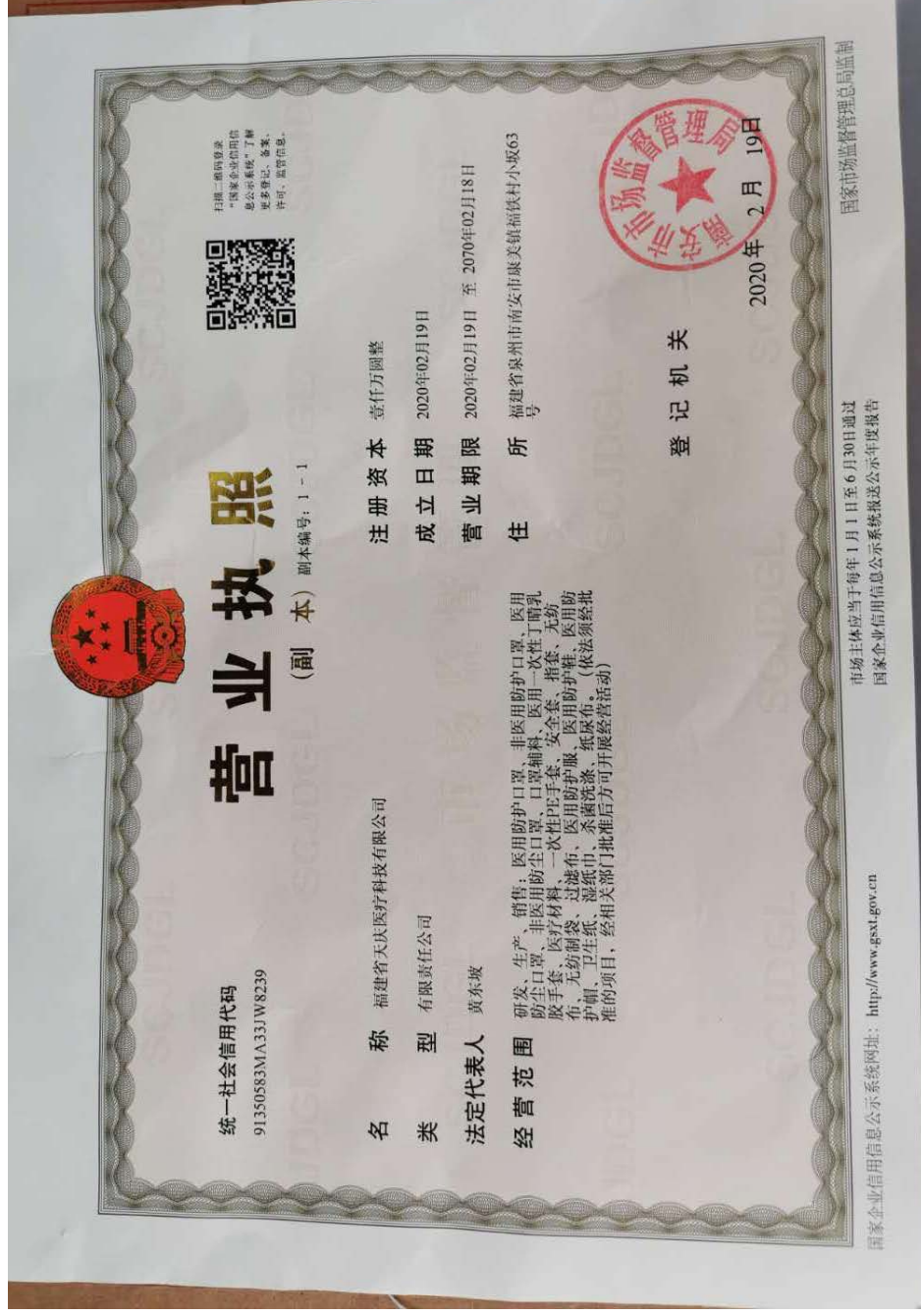
TESTING REPORT

名称: 福建省天庆医疗科技有限公司
地址: 福建省泉州市洛江区河市镇梧林村新街79号
委托单位: 福建省天庆医疗科技有限公司
样品名称: 一次性使用口罩
规格型号: 90片包
生产日期: 2020.03.12
检验日期: 2020.03.20

检验结果: 合格
检验结论: 合格
检验日期: 2020.03.20

Tianqing Test Report

3-Ply Disposable Face Masks (Tianqing) - Certifications



Tianqing Production License

3-Ply Disposable Face Masks (Tianqing) - FDA Website

FDA Manufacturer Listing

New SearchBack To Search Results

Establishment:
FUJIAN TIANQING MEDICAL TECHNOLOGY CO., LTD.
No. 63, Xiaoban, Futie Village
Kangmei Town, Nan'an City
Quanzhou Fujian, CN 362300
Status: Active; Awaiting Assignment Of Registration Number
Date Of Registration Status: 2020

Owner/Operator:
[Fujian Tianqing Medical Technology Co., Ltd.](#)
No. 63, Xiaoban, Futie Village
Kangmei Town, Nan'an City
Quanzhou, Fujian CN 362300
Owner/Operator Number: [10068368](#)

Official Correspondent:
Dong Po Huang
No. 63, Xiaoban, Futie Village
Kangmei Town, Nan'an City
Quanzhou, Fujian CN 362300
Phone: [86-186-67183323](#)

US Agent:
Yin Cheng
13611 38th Ave
Flushing , NY US 11354
Phone: 484 3839031 Ext
Email: Usmethod@Yahoo.Com

* Firm Establishment Identifier (FEI) should be used for identification of entities within the imports message set

FDA Device Listing

New SearchBack To Search Results

Proprietary Name: ASEPTIC ear-hanging respirator; Disposable Face Mask; Disposable surgical mask; KN95 Mask; Non-sterile ear-hanging mask
Classification Name: FACE MASK (EXCEPT N95 RESPIRATOR) FOR GENERAL PUBLIC/HEALTHCARE PERSONNEL PER IIE GUIDANCE
Product Code: [QKR](#)
Device Class: Not Classified
Registered Establishment Name: [FUJIAN TIANQING MEDICAL TECHNOLOGY CO., LTD.](#)
Owner/Operator: [Fujian Tianqing Medical Technology Co., Ltd.](#)
Owner/Operator Number: 10068368
Establishment Operations: Manufacturer

检验检测报告

(电子版)

扫码下载报告



防伪查询网址: www.gttc.net.cn

防伪码: XTHF-9484-54

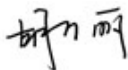
共3页 第1页



No: 200063500

委托单位	福建省天庆医疗科技有限公司 地址: 福建省泉州市南安市康美镇福铁村小坂63号		
样品信息	口罩 50个		
检验性质	委托检测	样品受理/测试开始日期	2020-04-03
		报告签发日期	2020-04-09
判定依据	T/CTCA 7-2019 《普通防护口罩》		
综合检验结论	---		
检验检测结果	检验检测项目	判定依据	判定
	细菌过滤效率	T/CTCA 7-2019	符合
	颗粒过滤效率	T/CTCA 7-2019	符合
	通气阻力	T/CTCA 7-2019	符合
备注	<p>本报告中检验检测项目均在相应标准规定的环境条件下进行(有注明的除外)。</p> <p>复印件、副本未重新加盖报告书确认章无效。</p> <p>本报告检验检测地址为广州市番禺区珠江路1号。</p>		

签发: 胡万丽 工程师

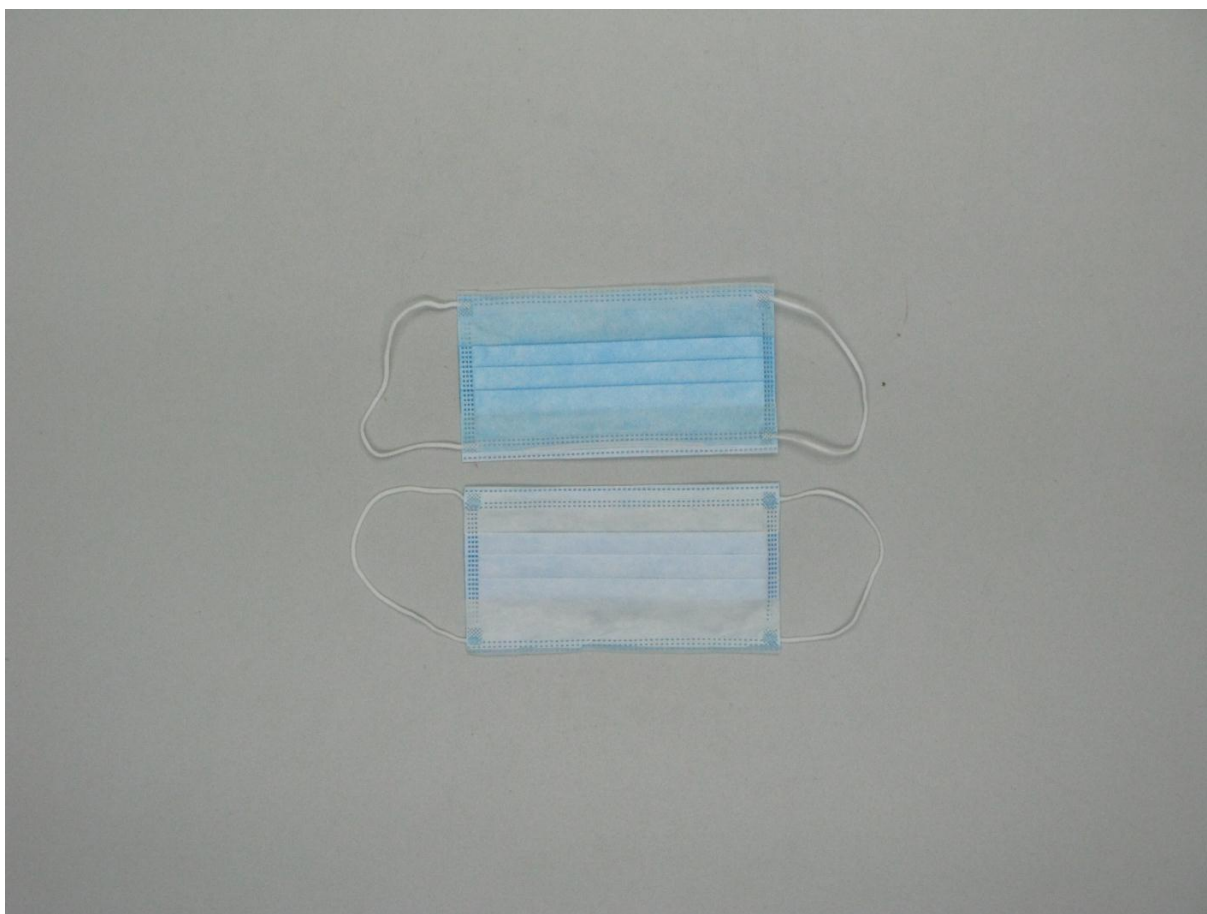



样品图片

(电子版)

No:200063500

共3页 第2页



检验检测报告附页 (电子版)

No:200063500

共3页 第3页

检验检测项目 (计量单位) [样品识别]	测试方法	标准值及允差	检验检测结果	判定	备注
●细菌过滤效率 (%)	YY 0469-2011 附录B 测试菌种: 金黄色葡萄球菌ATCC 6538 测试面积: 40cm ² 气体流速: 28.3L/min 平均颗粒直径: 3.0 μm 阳性质控值: 1.9×10 ³ CFU 阴性质控值: <1CFU	≥95	BFE ₁ 95.5 BFE ₂ 95.8 BFE ₃ 95.5	符合	注
●颗粒过滤效率 (%)	YY 0469-2011 5.6.2 气体流量: 30L/min 气溶胶颗粒: NaCl 气溶胶浓度: 15mg/m ³ 温度: 23.1℃ 相对湿度: 36.0%	≥80	最小值 81.5	符合	注
●通气阻力(Pa)	YY 0469-2011 5.6.2 气体流量: 30L/min 气溶胶颗粒: NaCl 气溶胶浓度: 15mg/m ³ 温度: 23.1℃ 相对湿度: 36.0%	≤80	最大值 28.4	符合	注
备 注	注: 判定指标来源于客户要求的团体标准(T/CTCA 7-2019)。我单位获CMA认定授权的检验能力覆盖T/CTCA 7-2019所检项目。				



——本报告结束——



191303340191



检验检测报告

TESTING REPORT

ZKHJ

报告编号: ZKHJS122003041

Report No.

委托单位: 福建省天庆医疗科技有限公司

Consigner:

样品名称: 一次性使用口罩

Sample Name:

报告日期: 2020-03-20

Date:



中科汇聚 (福建) 检测科技有限公司

ZKHJ Testing Technology Co., Ltd. (Fujian)

地址(Add): 福建省泉州市洛江区河山镇浮桥村新村78号(No.78 Xincun, Fuqiao Village, Heshi Town, Luojiang District, Quanzhou City, Fujian Province)

电话(Tel): 0595-28290388 邮编(Postal Code): 362011 电子信箱 (E-mail): 1966630852@qq.com

声 明 STATEMENT

一、报告无本实验室“检测专用章”无效，涂改无效。

This report is invalid without "special test stamp" of our laboratory and invalid if altered.

二、复制报告未重新加盖本实验室“检测专用章”无效。

The copy of this report is invalid without a new "special test stamp" of our laboratory.

三、报告无编制、审核及批准人签字无效。

This report is invalid without the signature of the Prepared, Audited and approver.

四、委托单位若对本报告有异议，应在收到检验结果之日起十五日内向本实验室提出。

If there is any objection for test result, please raise it to our laboratory within 15 days from receiving this test report.

五、对客户送样的委托检验（检测）仅对来样负责。未经检验检测机构同意，委托人不得擅自使用检验检测结果进行不当宣传。

The test results shown in this report is only applicable for the samples supplied directly by the customer, the customer shall not propagandize improperly without permission by our laboratory.

六、本实验室接受的委托送检，若无特别说明，生产单位及样品的相关信息未经本实验室确认，信息的真实性由委托单位负责。

If there is no special announcement in this report, the information of producer and samples is not identified by our laboratory, the customer is responsible for the truth of the samples.

七、检验检测报告中，资质认定能力范围外的项目，对社会不具有证明作用。

The items of this report out of laboratory certification scope does not serve as a proof for society.



191303340191





191303340191

中科汇聚（福建）检测科技有限公司
ZKHJ Testing Technology Co., Ltd. (FuJian)

检 验 检 测 报 告

报告编号: ZKHJS122003041

第 1 页 共 2 页

委托单位	名 称	福建省天庆医疗科技有限公司			样品概况	样品名称	一次性使用口罩
	地 址	福建省泉州市南安市康美镇福铁村小坂 63 号				规格/型号	10 片/包
	委托类型	委托检验				生产日期/批号	/
	联系人	赖三宝	电话	13615916661		样品数量及包装	6 包×10 片; 塑料包装
生产单位		/			接收日期		2020-03-12
样品说明		包装完好, 符合试验要求。					
以上信息由客户提供及确认。							
抽样概况		/					
检 验 依 据		GB 15979-2002 《一次性使用卫生用品卫生标准》 Q/FJTQ 001-2020 《一次性使用口罩》					
检 验 结 果		(见续页)					
检 验 结 论		该样品所检项目符合 Q/FJTQ 001-2020、GB 15979-2002 标准的要求。					
说 明		本报告中检测项目均在相应的标准规定的环境条件下进行 (有注明的除外)。					
检验日期		2020-03-12~ 2020-03-3.20			报告日期		2020-03-20

准/日期:

2020.3.20

审核/日期:

2020.3.20

编制/日期:

2020.3.20

注: 本公司报告用专用纸张, 复印本报告未重新加盖本公司“检测专用章”无效。

检验结果仅对测试样品负责, 未经检验机构同意, 委托人不得擅自使用检验结果进行不当宣传。

地址 (Add): 福建省泉州市洛江区河山镇浮桥村新村78号(No.78 Xincun, Fuqiao Village, Heshi Town, Luojiang District, Quanzhou City, Fujian Province) 电话(Tel): 0595-28290388



191303340191



中科汇聚（福建）检测科技有限公司
ZKHJ Testing Technology Co.,Ltd. (FuJian)

检验检测报告

报告编号: ZKHJS122003041

续页

第 2 页 共 2 页

检 验 项 目		标 准 要 求	检 验 结 果	单 项 判 定	检 验 方 法
细菌菌落总数 (CFU/g)		≤200	20	符合	GB 15979-2002
大肠菌群		不得检出	未检出	符合	GB 15979-2002
真菌菌落总数 (CFU/g)		≤100	<20	符合	GB 15979-2002
致病性化脓菌	金黄色葡萄球菌	不得检出	未检出	符合	GB 15979-2002
	溶血性链球菌	不得检出	未检出	符合	
	绿脓杆菌	不得检出	未检出	符合	
注：除非客户要求，本报告检测结果及符合性判定不考虑测量结果的不确定度。					

附图1 样品信息



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有限公司

注: 本公司报告用专用纸张, 复印本报告未重新加盖本公司“检测专用章”无效。

检验结果仅对测试样品负责, 未经检验机构同意, 委托人不得擅自使用检验结果进行不当宣传。

地址 (Add): 福建省泉州市洛江区河山镇浮桥村新村78号(No.78 Xincun, Fuqiao Village, Heshi Town, Luojiang District, Quanzhou City, Fujian Province) 电话(Tel): 0595-28290388



14141 Covello Street, Bldg. 6C, Van Nuys, CA 91405 Tel: 818-997-8848 Fax 818-997-8850

Company Background & References

Nationwide Medical Surgical Inc. (NMS) is an independent pharmaceutical wholesaler offering a wide range of FDA approved brand, generic and specialty prescription medications.

Our product portfolio includes an array of adult and pediatric vaccines, brand and generic capsules and tablets, injectables, antibiotics and much more. In addition, NMS supplies IV solutions and delivery systems, nutraceutical products, vital compounding ingredients, over-the-counter medications, and an extensive selection of PPE, medical and surgical supplies.

NMS's corporate offices and distribution center are located in Los Angeles, California.

NMS began operations in 1995 servicing customers in California. Today we are licensed in all 50 states to deliver products to retail pharmacies, physicians, hospitals, surgery centers, clinics, long-term care facilities, animal healthcare facilities and other healthcare providers.

Long-standing strategic relationships with the world's leading pharmaceutical manufacturers and distributors enable NMS to fill special orders requests for hard-to-find brand name and generic prescription drugs. During flu season, NMS works hand-in-glove with these organizations to distribute wholesale influenza vaccine to as many providers as possible. This has made us a partner of choice for those who serve high-risk patients and their families.

Our obligation to our customers, however, extends well beyond conveyance of the highest quality pharmaceuticals. NMS guarantees the safety, integrity and efficacy of products to which we have been entrusted. The NMS distribution center fulfills customer orders with 99.90% accuracy. We take pride in supplying the highest quality products available at competitive prices. NMS customer care and follow through are the gold standard in the industry.

The NMS Mission Statement:

- Be the nation's most reliable and respected supplier of critical-care pharmaceutical products
- Meet our customers' product needs as expeditiously and efficiently as possible
- Provide our customers with the highest quality products available and customer service second to none
- Develop strong and collaborative relationships with all manufacturers we represent

References:

- Thermal Scientific, Inc. • 12633 E FM 917 • Alvarado, Texas 76009 • Coby Wishert • (817) 274-2611
- Hisco • 7000 Burleson Road, Bldg A, Ste 100 • Austin, TX 78744 • Mike Garcia • Sales Manager • 512-382-3058 • mgarcia@hiscoinc.com
- General Labs • 2328 Teller Road • Newbury Park, CA 91320 • Tom Moore – President • 805-376-0901 • tom@genlabdirect.com



14141 Covello Street, Bldg. 6C, Van Nuys, CA 91405 Tel: 818-997-8848 Fax 818-997-8850

Company Name: Nationwide Medical Surgical Inc
Address: 14141 Covello St., Building 6C, Van Nuys, CA 91405
Main Phone: 818-997-8848
Toll Free: 800-997-8846
Company Contact: Daniel Blatt
Company Contact Email: dblatt@nmsincusa.com
Federal Tax ID: 954533603
Duns #: 927297945
Founded: California June 7, 1995
Company URL: nmsincusa.com
Authorized Representative: Shawn Mendel
Email: Shawn@ManifestUnltd.com
Phone: 310-435-9621

Authorized Signature:

Name: Daniel Blatt
Title: CEO
Date: June 29, 2020

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

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

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. Nationwide Medical Surgical, Inc.	
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 one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► Note: 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 not 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) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 14141 Covello Street, Building 6C	Requester's name and address (optional)
6 City, state, and ZIP code Van Nuys, CA 91405	
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										
9	5			-	4	5	3	3	6	0

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ► **6/17/2020**

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.

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.