

National Association of County Human Services Administrators

An Affiliate Organization of NACo II National Association of Counties

January 1, 2015

Dear Director:

The National Association of County Human Services Administrators (NACHSA) has appreciated your past support and asks you to please renew your dues for 2015 today.

Our membership growth and prudent use of Association funds enables us to freeze dues for the eleventh consecutive year. In 2014, NACHSA sent 23 timely *e-Alerts* on federal legislative and regulatory developments, grant opportunities, human services resources, best practice information and senior staff employment opportunities. We successfully fought back efforts to cut funding for the Supplemental Nutrition Assistance Program during the Farm Bill reauthorization and once again stopped moves to eliminate the Social Services Block Grant (SSBG). NACHSA kept us apprised of the progress legislatively of the newly-enacted law, the *Preventing Sex Trafficking and Strengthening Families Act* and will be reaching out to us in 2015 to provide comments to the federal government on its implementation. And, in 2014, NACHSA awarded four scholarships to NACHSA members to participate in a county-based health and human services conference.

As we enter the new year, there will likely be renewed efforts by some leaders in Congress to cap Medicaid and find other savings by once again proposing the elimination of SSBG. The pending reauthorization of the Temporary Assistance for Needy Families program, discussions on further reforms to child welfare services and the implementation of the new Workforce Innovation and Opportunity Act are also among the items to watch in 2015. Our involvement with numerous coalitions, including National Foster Care Coalition and the SSBG Coalition, provides a 'county voice' when federal policy positions and strategy are discussed.

NACHSA also provides networking opportunities for county directors. NACHSA members convene at NACo's legislative and annual conferences and participate alongside county elected officials as NACo crafts national health and human services policy. Through our broad array of contacts, NACHSA also assists individual members in identifying and contacting colleagues to help you tackle a specific issue that your agency may be addressing. Via monthly conference calls, the NACHSA Board keeps their colleagues up to date on local and state developments, and they help us in informing county colleagues in their state of federal developments.

During 2015, NACHSA will continue to serve you in these ways. Tom Joseph, NACHSA's Washington Representative with over 30 years of county-based experience, will continue to provide counsel to us and advocate for us in Washington, DC.

Thank you in advance for your support and participation. Enclosed is an invoice which is based on county population. If you have any other questions, please e-mail me at gosborne@wilson-co.com or call 252.206.4101, or contact Tom Joseph at tj@wafed.com or call 202.898.1446.

Sincerely,

Glenn Osborne NACHSA President

Director, Department of Social Services

Wilson County, North Carolina

J. Thun Oslame



NACHSA National Association of County Human Services Administrators

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Calendar Year 2015 NACHSA Membership Dues Invoice

Promoting Human Services Policies and Programs that Protect and Support Disadvantaged Populations in Counties throughout the Nation

County/State:	Membership Dues Ra	ates	
County Populat Less than 100,00		\$130	
Greater than 100	,000 but less than 250,000	\$315	
Greater than 250,000 but less than 500,000		\$655	
Greater than 500	\$1,310		
Statewide Association	Member:		
Statewide Assoc	iation of County Human Services	Administrators: \$1,310	
University/Research I	\$500		
	Contact Informati	on	
Name:			
Title:			
County/Department:			
Address:			
Telephone:			
E-Mail:			

Please return this form with your dues to:

Matthew Kurtz, NACHSA Treasurer Director, Knox County Department of Job and Family Services PO Box 334

Mount Vernon, OH 43050

Please remit dues payable to: NACHSA

Federal Tax ID: 52-2082778

Form
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

	Name (as shown as your income tay return)		_								_			
		Name (as shown on your income tax return)												
	National Association of County Human Services Administrators (NACHSA)													
2.	Business name/disregarded entity name, if different from above													
age														
<u>α</u>	Check appropriate box for federal tax classification:							Exemptions (see instructions):						
180	☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate													
Print or type								Exempt payee code (if any) 1						
育	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶							Exemption from FATCA reporting						
int 18th			code (if any)											
Print or type Specific Instructions on page	☐ Other (see instructions) ►													
ij	Address (number, street, and apt. or suite no.)	's nar	ne ar	d ad	dress	(opti	onal)						
ğ	PO Box 334													
See S	City, state, and ZIP code													
Ο̈́	Mount Vernon, OH 43050													
	List account number(s) here (optional)													
Pa														
	your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line oid backup withholding. For individuals, this is your social security number (SSN). However, for a	ocial	Secu	rity	numb	oer	_	_			_			
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resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>] ~			_							
	on page 3.													
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose					Employer identification number									
number to enter.		5 2	_ ا	2	0	8	2	.7	7	8				
		<u>_</u>		<u> </u>	Ľ		_							
Pai														
Unde	er penalties of perjury, I certify that:													
1. Th	ne number shown on this form is my correct taxpayer identification number (or I am waiting for a number	to b	e iss	ued	to m	e), a	nd							
Se	am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have no ervice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividen o longer subject to backup withholding, and													
3. 1 a	am a U.S. citizen or other U.S. person (defined below), and													
4. Th	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is corre	ct.												
beca intere gene instru	ification instructions. You must cross out item 2 above if you have been notified by the IRS that you are use you have failed to report all interest and dividends on your tax return. For real estate transactions, it est paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an indivirally, payments other than interest and dividends, you are not required to sign the certification, but you ructions on page 3.	em 2 dual	doe retir	s no eme	app nt an	oly. F	or n	nort ent (l	gage RA),	e and	•			
Sig: Her	Signature of U.S. person Date	12/3	30/	13										

General Instructions

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding 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 are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- · An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.