

NEW CUSTOMER INFORMATION

3455 RYAN DRIVE, ESCONDIDO, CA 92025

E-MAIL: ACCOUNTING@MASONALEWORKS.COM

SALES REP:

BUSINESS NAME:		PHONE NUMBER:			ALT. PHONE NUMBER:					
PURCHASER NAME:		BUSINESS E-	MAIL:							
BUSINESS ADDRESS:										
CITY, STATE, ZIP										
ACCOUNTS PAYABL	E INFORMA	NOITA								
ACCOUNTING CONTACT NA	M F:	PHONE NUME	BFR:		ALT. PHONE N	II M B F R :				
	···· <u>-</u> ·	THORE NUMBER.				The state of the s				
ACCOUNTING ADDRESS:										
ACCOUNTING ADDRESS:										
CITY, STATE, ZIP			E - M A I L : **RE	QUIRED**						
DELIVERY INCORMA	TION		•							
DELIVERY INFORMA	IION									
DELIVERY HOURS:										
MONDAY:	TUESDAY	:	WEDNESDAY:		THURSDAY:	F	RIDAY:			
NO DELIVERIES ON MONDAYS	10		TO	10			10			
	/									
DELIVERY LOCATION/NO	DIES (FRONI, E	SACK, SIDE,	EIC.):							
(WE WILL MAKE EVERY EFFORT TO ENSURE Y	OU RECEIVE YOUR ORE	ER AS PROMPTLY A	S POSSIBLE. HOWEVER,	WE CANNOT ALW	AYS GUARANTEE THAT Y	OUR ORDER WILL BE	DELIVERED AT ANY			
SPECIFIC TIME.)										
ABC LICENSE										
NAME OF LICENSEE:		LICENSE TYPE	:	LICENSE NU	MBER:	EXPIRATION D	ATE:			
LICENSEE ADDRESS:										
LICENSEL ADDRESS.										
CITY, STATE, ZIP:										
I HEREBY CERIFY										
ACCURATE AND 1 DEPARTMENT O										
					ALE WORKS		KESELL			
ALG		LVERAG	LO I KOM A	TAJON I	ALL WORKS	LLO.				
C.I.C.N.I.A.T.I.D.E.		— -				D 4.7.5				
SIGNATURE		1	ITLE			DATE				

I HEREBY CERTIFY:

CALIFORNIA RESALE CERTIFICATE

1. I HOLD VALID SELLER'S PERMIT NUMBER:					
2. I AM ENGAGED IN THE BUSINESS OF SELLING THE FOLLOPERSONAL PROPERTY: CANNED AND KEGGED BEER	WING TYPE OF TANGIBLE				
3. THIS CERTIFICATE IS FOR THE PURCHASE FROM	ON ALE WORKS LLC				
4. I WILL RESELL THE ITEM(S) LISTED IN PARAGRAPH 5, WHICH I AM PURCHASING UNDER THIS RESALE CERTIFICATE IN THE FORM OF TANGIBLE PERSONAL PROPERTY IN THE REGULAR COURSE OF MY BUSINESS OPERATIONS, AND I WILL DO SO PRIOR TO MAKING ANY USE OF THE ITEM(S) OTHER THAN DEMONSTRATION AND DISPLAY WHILE HOLDING THE ITEM(S) FOR SALE IN THE REGULAR COURSE OF MY BUSINESS. I UNDERSTAND THAT IF I USE THE ITEM(S) PURCHASED UNDER THIS CERTIFICATE IN ANY MANNER OTHER THAN AS JUST DESCRIBED, I WILL OWE USE TAX BASED ON EACH ITEM'S PURCHASE PRICE OR AS OTHERWISE PROVIDED BY LAW.					
5. DESCRIPTION OF PROPERTY TO BE PURCHASED FOR RESALE:					
BOTTLED AND KEGGED BEER					
6. I HAVE READ AND UNDERSTAND THE FOLLOWING:					
FOR YOUR INFORMATION: A PERSON MAY BE GUILTY OF A TAXATION CODE SECTION 6094.5 IF THE PURCHASER KNOWS SHE WILL NOT RESELL THE PURCHASED ITEM PRIOR TO ANY DEMONSTRATION, OR DISPLAY WHILE HOLDING IT FOR RESELT TO AVOID PAYMENT TO THE SELLER OF AN AMISUSING A RESALE CERTIFICATE FOR PERSONAL GAIN OF FOR EACH PURCHASE, FOR THE TAX THAT WOULD HAVE BE OF THE TAX OR \$500, WHICHEVER IS MORE.	WS AT THE TIME OF PURCHASE THAT HE OR USE (OTHER THAN RETENTION, SALE) AND HE OR SHE FURNISHES A RESALE MOUNT AS TAX. ADDITIONALLY, A PERSON R TO EVADE THE PAYMENT OF TAX IS LIABLE,				
NAME OF PURCHASER	TITLE				
SIGNATURE OF PURCHASER, PURCHASER'S EMPLOYEE OR AUTHORIZED REPRESENTA	TIVE DATE				
PRINTED NAME OF PERSON SIGNING	TELEPHONE NUMBER				
ADDRESS OF PURCHASER	1				



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.

Befor	е у	bu begin. For guidance related to the purpose of Form W-9, see <i>Purpose of Form</i> , below.									
	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the orentity's name on line 2.)	wner's na	me on	line 1, a	and ent	ter the	busi	ness/d	isregard	led
	2	2 Business name/disregarded entity name, if different from above.									
Print or type. See Specific Instructions on page 3.	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. □ Individual/sole proprietor □ C corporation □ S corporation □ Partnership □ Trust/estate □ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. □ Other (see instructions)				- Ex	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)					
P Specific	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax and you are providing this form to a partnership, trust, or estate in which you have an ownership it this box if you have any foreign partners, owners, or beneficiaries. See instructions	nterest, c						nts ma ited St	intained ates.)	'
See	5	Address (number, street, and apt. or suite no.). See instructions.	Request	er's nar	ne and	addres	ss (opt	tiona)		
	6	City, state, and ZIP code									
	7	List account number(s) here (optional)									
Pai	t I	Taxpayer Identification Number (TIN)									
Enter	VOL	r TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid	Social	secur	ity nun	nber				
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 <i>How to get a TIN</i> . later.						-		_			
					yer ide	r identification number					
		ne account is in more than one name, see the instructions for line 1. See also What Name To Give the Requester for guidelines on whose number to enter.	and		-						
Par	i II	Certification	l			-					
Unde	· pe	nalties of perjury, I certify that:									
1. The	nu	mber shown on this form is my correct taxpayer identification number (or I am waiting for	a numbe	r to be	issue	d to n	ne); aı	nd			
Sei	vice	of subject to backup withholding because (a) I am exempt from backup withholding, or (b) a (IRS) that I am subject to backup withholding as a result of a failure to report all interest oper subject to backup withholding; and									ım
3. I ar	n a	U.S. citizen or other U.S. person (defined below); and									
4. The	FA	TCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reportin	a is corr	ect.							

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	Signature of	
	U.S. person	Dat

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they