

2020 SPIFF FORM

Please complete and fax or e-mail to Mindy Litten at the Hickory Contract: Mindy.Litten@HickoryContract.com fax: 704-462-2672 Ph: (704)462-2988

| Your Legal Name: | |
|--|---|
| Your Social Security Number: | |
| Dealership Name: | |
| Dealership Address: | |
| Dealership City/State/Zip: | |
| | |
| Phone: | |
| FAX: | |
| E-Mail Address: | |
| Address to send Spiff: | |
| City/State/Zip: | |
| Purchase Order Number: | |
| Substitute Form W-9: | |
| Under penalties of perjury, I certify that: | |
| 1. the number shown on this form is my correct taxpayer(SS) identification number, and | |
| 2. I am not subject to backup withholding because (a)I am exempt from backup withholding of (b)I have not been notified by the IRS that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding. | r |
| Signature: X Date: | |