

Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents. Go to www.irs.gov/FormW7 for instructions and the latest information.

OMB No. 1545-0074

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Before you begin:	umba- (001)	ŋ			for a nev						
• Don't submit this		<u> </u>			Renew an existing ITIN						
Reason you're sub iederal tax return w	mitting Form W-7. Re vith Form W-7 unless	ead the instruct s you meet one	ions for the box of the except	x you che t ions (see	eck. Caution instructions	: If you ch	neck box	b, c, d, e, f, or t	g, you n	nust file a U.S.	
a Nonresident	t alien required to get a	an ITIN to claim	ı tax treaty bene	efit (you r	nust also che	eck and c	omplete	box h (see instr	ructions))	
_	t alien filing a U.S. fede		, 					,	-/,		
_	nt alien (based on days		e United State	s) filing a	า U.S. federal	I tax return	'n				
_	of U.S. citizen/resident	•		, -				tructions)			
	ont of U.S. citizen/resident alien If d , enter relationship to U.S. citizen/resident alien (see instructions) If d or e , enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions)										
,											
	t alien student, profess and complete box h (se	sor, or research	ner filing a U.S. f	federal ta	ax return or c	laiming a	n excepti	ion (if claiming a	an excep	tion, you must	
g Dependent/s	spouse of a nonreside	nt alien holdina	a U.S. visa								
h Other (see in	netructions)										
	on for a and f : Enter tre	eaty country			and	I treaty art	ticle num	nber			
Name	1a First name	<u> </u>		dle name		, 41		st name			
(see instructions)	Francisc							Hermoso			
Name at birth if	1b First name		Midd	dle name				st name			
different			, and					-			
Applicant's Mailing	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions.										
Address	City or town, sta	City or town, state or province, and country. Include ZIP code or postal code where appropriate.									
Foreign (non-U.S.)	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.										
Address (see instructions)	City or town, state or province, and country. Include postal code where appropriate.										
Birth Information	4 Date of birth (mo	4 Date of birth (month / day / year) Country of birth				City an	nd state o	or province (opti	ional) 5	Male Female	
Other	6a Country(ies) of c	citizenship	6b Foreign tax	(I.D. num	nber (if anv)	6c Type	of U.S.	visa (if any), nun	nber, and		
Information]		J		. "	1		3,,			
VII	6d Identification do	ocument(s) subn	nitted. (Comple	ete for the	= first docum	nent subm	nitted. Fo	r multiple docur	ments s	ee instructions\	
	Passport		icense/State I.D		USCIS doc			Othor		ee manachons,	
	Issued by:	_			-	cath				he United State	
	Number:				Exp. date: _	/ /		_ Date of end _ (MM/DD/Y)	•		
i	6e Have you previo							· · · · · · · · · · · · · · · · · · ·	,		
	No/Don't kn			ai 110	ao oei vic	, varribe	(NION)				
	Yes. Comple	•		st on a ch	eet and attac	ch to this	form (see	e instructione)			
ł	6f Enter ITIN and/o			a si	and alla	to uils	IRSN				
	and name under						Mon				
	and name under	willou it was k		First nan	 ne	Mide	dle name	, ——	Last	name	
ł	6a Namo of acili-	3/University									
	6g Name of college City and state	orannv e rsity or c	ompany (See II	. เอน นCไไปโ	· · · · · · · · · · · · · · · · · · ·	l enati	h of eta	/			
Sian	City and state	ırv. I (applicant/	enate/accent	Ce suoz,	declare that ! !	ave ever	ned this	pplication install	Ju 2002.	panving	
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.										
Keep a copy for vour records.	Signature of applican	Date (month / day / year) Phon			one number						
I	News	an-P			/ / Park	/	is '	alie - '			
Ì	Name of delegate, if applicable (type or print)				Delegate's relationship to applicant						
					Parent Power of attorney Court-appointed guardian						
Acceptance	Signature				Date (month			ione			
Agent's				<u> </u>	/	/ / Fax		X			
Jse ONLY	Name and title (type o	or print)		Name	of company EIN				PTIN		
							Office of	code			
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