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# LE GRAND BAL ENTRY FORMS

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Non-Employee



LAMAR UNIVERSITY



COLLEGE OF FINE ARTS & COMMUNICATION  
**LAMAR UNIVERSITY**  
Department of Art & Design

ART WORK AUCTION ENTRY FORM: Le GRAND BAL  
Please Print

**Date Received:** \_\_\_\_\_ **Date Returned** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **LU/SSN#:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**TELEPHONE: (day)** \_\_\_\_\_ **(cell)** \_\_\_\_\_

**Please Check 1:** Student (S)\_\_\_ Faculty (F)\_\_\_ Alumni (A)\_\_\_ Friend (FR)\_\_\_

1. **Title of artwork:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Medium:** \_\_\_\_\_ **Size:** \_\_\_\_\_

**Grand Bal Minimum Bid:** \$ \_\_\_\_\_ **Grand Bal #:** \_\_\_\_\_

**Fair Market Value:** \$ \_\_\_\_\_ **Condition:** \_\_\_\_\_

2. **Title of artwork:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Medium:** \_\_\_\_\_ **Size:** \_\_\_\_\_

**Grand Bal Minimum Bid:** \$ \_\_\_\_\_ **Grand Bal #:** \_\_\_\_\_

**Fair Market Value:** \$ \_\_\_\_\_ **Condition:** \_\_\_\_\_

3. **Title of artwork:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Medium:** \_\_\_\_\_ **Size:** \_\_\_\_\_

**Grand Bal Minimum Bid:** \$ \_\_\_\_\_ **Grand Bal #:** \_\_\_\_\_

**Fair Market Value:** \$ \_\_\_\_\_ **Condition:** \_\_\_\_\_

**Please note: All unsold works not claimed within 14 days of the auction become property of the Department of Art & Design. The Art Department of Art & Design is not responsible for the artwork.**

# Le Grand Bal Art Auction Signature Sheet

Your Entry Is Not Complete Until Signature Sheet Is Signed.

**Your signature below constitutes agreement to the following terms:**

Participating artists will receive 50% of the final bid price on artworks. The remaining 50% will be retained by the College of Fine Arts and Communication for student scholarships.

All artworks submitted to the Silent Auction of Le Grand Bal are auction items benefitting student scholarships in the Department of Art & Design, College of Fine Arts and Communication, Lamar University. Any artworks bid on, but not paid for, will be returned to the artist within one month of Le Grand Bal. Any artworks unclaimed by the artist within two weeks of the Silent Auction (if unsold) or two weeks after notification of non-payment by a bidder, will become property of the Department of Art & Design.

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Chair, Department of Art & Design

Artist Signature

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Date

Date

Students/Artists Who Have Never Worked for Lamar in Any Way  
Information for Determining Employee/Contractor Status

\_\_\_\_\_ Date \_\_\_\_\_

Worker's Name: \_\_\_\_\_ Worker's LU# \_\_\_\_\_

Proposed Date of Service: \_\_\_\_\_

Services to be Rendered: Artwork for Friends of the Art Le Grand Bal Silent Auction

Yes No

- X   This worker has been an employee of Lamar for the past 12 months.
- X   This worker will have a Purchase Order processed for payment of these services.
- X   This worker provides similar services to the public.
- X   This worker represents to the public that he is in the business of providing similar services to the public.
- X   This worker is required to provide all the required tools, materials, and supplies necessary to complete the work.
- X   This worker is paid on a "per job" basis. The time necessary to complete the work does not affect the worker's remuneration.
- X   All expenses associated with the performance of these services, including travel and meals are borne by this worker.
- X   This worker may hire and supervise others to assist in completion of the work. The decision to hire is solely in the control of the worker.
- X   Assistants hired by this worker are subject to review by the University.
- X   Any compensation paid to assistants is borne by this worker and in no way affects the agreed upon remuneration.
- X   Where services are required to be performed on the University's property, the University may require that services be performed within certain hours, but cannot require that this worker be present at any specific time during those hours.
- X   Lamar does have the right to control the services performed.
- X   This worker is required to perform the services personally.
- X   Lamar does train the worker.
- X   This worker does report to a Lamar employee.
- X   This worker may be discharged at any time without Lamar incurring liability.
- X   This worker may quit at any time without incurring liability.
- X   The service provided by this worker shall be performed for the time period covered in this worker's contract. Neither this worker nor the University has the right or obligation to provide or receive services for any period beyond that covered by the contract.

Completed by: \_\_\_\_\_ LU Phone: \_\_\_\_\_ LU P.O. Box: \_\_\_\_\_

Payment Information:    Hourly    Salary    Lump Sum    Other-Describe: \_\_\_\_\_

Pay as:    Employee    Contractor

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources

# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	<b>2</b> Business name/disregarded entity name, if different from above		
	<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input 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) ▶ _____ <b>Note:</b> 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 <b>not</b> 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) ▶ _____	<b>4</b> 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>	
	<b>5</b> Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)	
	<b>6</b> City, state, and ZIP code		
<b>7</b> List account number(s) here (optional)			

<b>Part I Taxpayer Identification Number (TIN)</b> 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 <i>How to get a TIN</i> , later.  <b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="11" style="text-align: center;"><b>Social security number</b></td> </tr> <tr> <td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td> </tr> <tr> <td colspan="4"> </td><td style="text-align: center;">-</td><td colspan="3"> </td><td style="text-align: center;">-</td><td colspan="4"> </td> </tr> </table> <p style="text-align: center;"><b>or</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="11" style="text-align: center;"><b>Employer identification number</b></td> </tr> <tr> <td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td><td style="width:30px;"> </td> </tr> <tr> <td colspan="4"> </td><td style="text-align: center;">-</td><td colspan="7"> </td> </tr> </table>	<b>Social security number</b>																										-				-					<b>Employer identification number</b>																										-							
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<b>Part II Certification</b> Under penalties of perjury, I certify that:  1. 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 2. 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 3. I am a U.S. citizen or other U.S. person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.  <b>Certification instructions.</b> 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.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>Signature of U.S. person ▶</b></td> <td style="width:40%;"><b>Date ▶</b></td> </tr> </table>	<b>Signature of U.S. person ▶</b>	<b>Date ▶</b>
<b>Signature of U.S. person ▶</b>	<b>Date ▶</b>		

## 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](http://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-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.*

## New Vendor Information

Lamar University requires a Purchase Order for purchases. All Purchase Orders will be electronically mailed or faxed. **INVOICES MAY BE SENT TO: AccountsPayable@lamar.edu.**

**The following information is required in order to accurately process a Purchase Order or remit Payment.**

Please complete and return this New Vendor Information form along with the attached IRS W-9 form.

Company Name: \_\_\_\_\_  
Employer Identification Number(EIN): \_\_\_\_\_  
Owner's Name if not Incorporated: \_\_\_\_\_  
Sole Proprietors: Owner's Social Security Number: \_\_\_\_\_  
Partnership:  
    Partner 1 Name and Social Security Number/FEI: \_\_\_\_\_  
    \_\_\_\_\_  
    Partner 2 Name and Social Security Number/FEI: \_\_\_\_\_  
    \_\_\_\_\_  
Order from Address: \_\_\_\_\_  
City, State and Zip Code: \_\_\_\_\_  
Remit to Address: \_\_\_\_\_  
City, State and Zip Code: \_\_\_\_\_  
Telephone Number : \_\_\_\_\_  
Vendor Contact and Title: \_\_\_\_\_  
Contact Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Contact Email Address: \_\_\_\_\_  
If Texas Corporation Charter Number: \_\_\_\_\_  
If Professional Association Charter Number: \_\_\_\_\_  
If Limited Partnership File Number: \_\_\_\_\_  
If a Texas Certified HUB Vendor Certification Number: \_\_\_\_\_  
    HUB Classification: \_\_\_\_\_