

DRIVER'S NAME:

2025 DRIVER PAY-OUT FORM

ATTENTION ALL DRIVERS/OWNERS:

Please be sure to complete this form. If not completed, we will be unable to release your pay out.

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Car #:	Divisio	n: Mo	dified	Sp	oortsman	Street Stock
FOR T	ΓAX PURPOSES O	NLY:				
Enter your Tax ID Number (TIN) on the appropriate line. The TIN provided must match the name given on the "NAME" line to avoid backup withholding. For individuals, this is your Social Security Number (SSN). For other entities, it is your Employer Identification Number (EIN).						
CERTIFICATION: Under penalties of perjury, I certify that 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 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.						
WINNINGS WILL BE MADE PAYABLE TO: (Please Print Legibly)						
Name or Corporation Name:						
	•	*This should i	match tax fil	ings		
Address:						
City:					State:	Zip:
Telephone	e: <u>(</u>)			Cell:	_()	
Email:						
	Social Security #:				-	
OR						
	Federal Tax ID (EIN)	#:	-			
SIGNATU	JRE:					
Date:						
239 Wisner Avenue					Telepho	one: 845-775-4933

Email: ocfs1@yahoo.com

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