## orm W-10

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## **Dependent Care Provider's Identification and Certification**

(Rev. July 2011)

Department of the Treasury
Internal Revenue Service

Do NOT file Form W-10 with your tax return. Instead, keep it for your records.

Part I	Dependent Care	Provider's Identification (S	See instructions.)	
	Name of dependent care provider		Provider's taxpayer identification number	
Please print pr	Address (number, street, and apt. no.)			If the above number is a social security number, check here ▶
type	City, state, and ZIP code			
ortifico	tion and Signature of	Dependent Care Provider Und	er penalties of perium 1	as the dependent care provider, certify that my
		ntification number shown above ar		as the dependent care provider, certify that m
Please			Date	
Sign Here				
Part II		ess of Person Requesting P		instructions.)
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Name	of Provider :			
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or the	care of (name of ch	ilia(ren)		
	Signature of	Parent	Date	
	3			
			Dete	
	Signature of	Provider	Date	
partment emal Rev	of the Treasury enue Service	Do NOT file Form W-10 v	with your tax return. Inste	ead, keep it for your records.
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	Name of dependent care provider			Provider s taxpayer identification frames
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