



The Pittsburgh Ophthalmology Society

Physicians Defining Eye Care in Southwestern PA

2018- 2019

MONTHLY MEETING EXHIBITOR OPPORTUNITY

This form MUST be completed and submitted to secure Exhibit space

Nadine Popovich

The Pittsburgh Ophthalmology Society 713 Ridge Avenue Pittsburgh PA 15212

Website: www.pghoph.org

email to npopovich@acms.org phone: (412) 321-5030 Fax (412) 321-5323

COMPANY NAME

(Please complete as you would like it to appear on signage)

Select One

Exhibit (sole Exhibitor)

Co-Exhibit Meeting

Date of Meeting

Contact Person

Address

Email

PHONE

Benefits of participation at a Pittsburgh Ophthalmology Society Monthly Meeting include:

- Display Table set up in foyer - (1) 6 ft table w/2 chairs
- Access to 50 to 70 Ophthalmologists with opportunity for engagement with physicians prior to start of meeting
- Provided 5 minutes of podium time (at the end of business meeting) to present your company's product to attendees
- Participate in the "Visit with Exhibitor/Networking" session. This 45-minute session provides Exhibitors an opportunity for one-on-one conversations with physicians.
- (Company's name on meeting announcement and follow-up thank you printed pieces
- Company's name and logo on POS website

Please list Industry Representatives attending:

Name _____ Email _____ Phone _____

Name _____ Email _____ Phone _____

The participation fee is: Exhibit (sole) / \$2,500.00 Co-Exhibitor / \$1,500.00.

The Society's Tax ID# is 25-6064814

Please make a check payable to: Pittsburgh Ophthalmology Society

Mail payment to:

Nadine Popovich, Administrator
Pittsburgh Ophthalmology Society
713 Ridge Avenue Pittsburgh PA 15212



POS Monthly Meeting

A G E N D A

Representatives are welcome to set up prior to 4:00 pm the day of the program.

- 4:00 p.m. Registration /Visit with Exhibitors
- 4:30 p.m. Welcome & First Lecture (Exhibitors welcome to attend lecture)
- 5:35 p.m. Case Presentation (Resident and questions /answers by Guest Faculty)
- 5:50 p.m. Business Meeting of the Pittsburgh Ophthalmology Society
Exhibitors will have 5 minutes of podium time after the business portion
- 6:00 p.m. Visit with Exhibitors/Networking Session
- 6:45 p.m. Visit with Exhibitors/Networking concludes, guests seated for dinner
- 7:05 p.m. Second Lecture Begins (Exhibitors welcome to attend lecture)
- 8:05 pm Conclusion of Program

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
 See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Pittsburgh Ophthalmology Society	
2 Business name/disregarded entity name, if different from above Pittsburgh Ophthalmology Society	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	
<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" 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) ▶ _____ <small>Note: 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 not 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.</small> <input type="checkbox"/> Other (see instructions) ▶ _____	
4 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>	
5 Address (number, street, and apt. or suite no.) See instructions. 713 Ridge Ave	Requester's name and address (optional)
6 City, state, and ZIP code Pittsburgh PA 15212	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

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 *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
[] [] [] - [] [] - [] [] [] []	
or	
Employer identification number	
2 5 - 6 0 6 4 8 1 4	

Part II Certification

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.

Certification instructions. 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.

Sign Here	Signature of U.S. person ▶	Date ▶ 5-16-2018
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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.

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-INT (Interest earned or paid)

- 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.