



MICHIGAN MEDICINE
DEPARTMENT OF INTERNAL MEDICINE
CONTINUING MEDICAL EDUCATION
24 FRANK LLOYD WRIGHT DR.
LOBBY J, SUITE 1200
ANN ARBOR, MI 48106-5750
MEDICINE.UMICH.EDU/INTMED/CME

INVITATION TO EXHIBIT

Dear Representative,

On behalf of Michigan Medicine's Department of Internal Medicine Continuing Medical Education, we are pleased to announce the Update in Pulmonary & Critical Care Medicine conference, Thursday - Friday, October 12-13, 2023 at Weber's Boutique Hotel, Ann Arbor, MI. We invite you to participate as an exhibitor.

The exhibit fee of \$2,000 per day includes a skirted table or a table top display and acknowledgment off participation in the course syllabus, welcome slides, and announcements. To maintain a separation of promotion and education, exhibits will be located outside of the meeting room. No more than two representatives per exhibit. space is limited, early registration is advised, as exhibit space is on a first come first serve basis.

To participate, please complete page two. University of Michigan's tax ID number is 38-6006309 and our W-9 form is attached for your convenience. If you have any questions, please contact us at (734) 232-3469 or intmedcme@umich.edu.

Thank you for your support.

Sincerely,

Michigan Medicine Department of Internal Medicine CME Team



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CONTACT INFORMATION

Activity Title	Update in Pulmonary & Critical Care Medicine
Location	Weber's, Ann Arbor, MI
Date(s)	Thursday - Friday, October 12-13, 2023
Company Name (Exhibitor) <i>As it should appear on printed materials.</i>	
Exhibit Contact (if different than Exhibit Rep.)	
Name of Rep(s) Exhibiting <i>Maximum of two reps per exhibit.</i>	
Address 1	
Address 2	
City / State / Zip	
Telephone	
Email	

EXHIBIT OPTIONS

- Full Course - \$4,000**
THURSDAY - FRIDAY
- One Day - \$2,000**
THURSDAY ONLY
- One Day - \$2,000**
FRIDAY ONLY

PAYMENT INFORMATION

CHECKS:

24 Frank Lloyd Wright Dr., Lobby J, Suite 1200
Ann Arbor, MI 481066- 5750
Attn: MI Medicine Department off Internal Medicine CMEE

CREDIT CARD:

If you are paying by credit card, please navigate to the SSC credit card website linked here:: <https://ssc.umich.edu/payments/pay-by-credit-card//>
You will need to use the unique identifier to complete the payment process:((PULM))

Questions? (734) 232-3469 / intmedcme@umich.edu

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.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Regents of the University of Michigan

2 Business name/disregarded entity name, if different from above

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.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

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.

Other (see instructions) ▶ _____

Public Entity

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) **3**

Exemption from FATCA reporting code (if any) **C**

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

5082 Wolverine Tower, 3003 South State Street

6 City, state, and ZIP code

Ann Arbor, MI 48109-1287

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.
See Specific Instructions on page 3.

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

3	8	-	6	0	0	6	3	0	9
---	---	---	---	---	---	---	---	---	---

Part II 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; and
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ▶

Susan E. Ryerson

Date ▶ 01/10/2020

General Instructions

Section references are to the Internal Revenue Manual.

Future developments. For the related to Form W-9 and its instructions after they were published, go to [www.irs.gov/formw9](#).

Purpose of Form

An individual or entity (Form W-9 information return with the IRS identification number (TIN) which (SSN), individual taxpayer identification number (EIN), to report on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

Regents of The University of Michigan
(Includes Michigan Medicine)

Is an exempt organization

[Code 501(c)(3)]

ID 38-6006309

Form 1099 IS NOT REQUIRED

Susan E. Ryerson, Sr. Tax Advisor

(734) 764-9219

ing those from stocks or mutual
income, prizes, awards, or gross
I sales and certain other
estate transactions)
third party network transactions)
st), 1098-E (student loan interest),
onment of secured property)
3. person (including a resident

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.