



4500 San Pablo Road
Jacksonville, Florida 32224
904-953-7050
Tax ID: 59-3337028

September 7, 2023

Dear Exhibitor,

On behalf of Course Directors Christan Santos, APRN; Sarah Peacock, APRN, D.N.P., and Philip Lowman, M.D. we hope you will consider a display and/or virtual exhibit opportunity at our ***Mayo Clinic Critical Care Review for the Nurse Practitioner and Physician Assistant 2024*** held **April 5-6, 2024** at **Mayo Clinic Kinne Auditorium – Cannaday Building**. The 2-day course is offered LIVE with a LIVESTREAM enrollment option and we expect around 100 nurse practitioners, physician assistants, hospital and intensive care physicians and residents, registered nurses, allied health professionals, respiratory therapists, and NP/PA students in acute care.

Mayo Clinic's Critical Care Review for the Nurse Practitioner and Physician Assistant is an interactive course designed for advanced practice providers working with critically ill adult patients. The course is comprised of lecture-based sessions covering essential acute care topics such as vasoactive support, ECMO, secondary trauma assessment, intracranial pressure, anticoagulant reversal, acute liver failure, toxicology, and more. Each day offers an optional ultrasound workshop and an optional procedural skills workshop (workshops are repeated with the same content on both days to increase attendee capacity for each). These workshops provide both introductory and advanced concepts in ultrasound, airway management, and bedside procedures necessary for daily practice in an intensive care setting.

Display fees to exhibit at the live course or the virtual exhibit hall is **\$1,750** or **\$2,500** for both LIVE with a LIVESTREAM. Space at the live course is limited and table assignments will be made on a first-come, first-served basis depending on the date the signed exhibit letter of agreement (LOA) letter is received in our office.

Live Exhibit Benefits:

- Promotion available at the live two-day course
- Exhibitors are provided the same meals and beverages provided to registered attendees
- Attendees are encouraged daily by the course moderator to visit and connect with the exhibitors
- Includes a 6ft table, two chairs and linen at the course
- An attendee list including: registered attendee's name, degree, specialty, city, state, and demographics distributed post course
- Vendor recognition in online course syllabus
- An acknowledgement on the break slide announcements during the course

Virtual Exhibit Benefits:

- Promotion available from the time a company signs the LOA is made until the last day of the course on April 6, 2025
- Listing in the on-line exhibitor directory linked to your company website and landing page (listing will be alphabetical)
- Exhibit booth customization, options include PowerPoint slide, PDF handout or video
- Post course report providing analytics on page traffic
- An attendee list including: registered attendee's name, degree, specialty, city, state, and demographics distributed post course
- Vendor recognition in the on-line course syllabus
- An acknowledgement on the break slide announcements during the course

Mayo Clinic, an integrated, not-for-profit group practice, is committed to meeting its responsibility as a national medical education resource. In support of improving patient care, Mayo Clinic College of Medicine and Science is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team. Our programs provide valuable information on unmet needs to the medical community. We sincerely appreciate your consideration and hope you will take the opportunity to join us for a truly unique educational program.

Sincerely,

Kelly Tanner

Make checks payable to:

Mayo Clinic Florida

4500 San Pablo Road

Jacksonville, FL 32224

Attn: Accounting Activity #24J01184

Tax ID: 59-3337028

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. Mayo Clinic Jacksonville	
	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.	
	<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) ▶ _____ 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.	
	<input checked="" type="checkbox"/> Other (see instructions) ▶ <u>501(c)(3) Tax-exempt Nonprofit Corporation</u>	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
	Exempt payee code (if any) <u>1</u> Exemption from FATCA reporting code (if any) <u>A</u> <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. 4500 San Pablo Road		
6 City, state, and ZIP code Jacksonville, FL 32224		
7 List account number(s) here (optional)		
		Requester's name and address (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									
5	9	-	3	3	3	7	0	2	8

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 ▶ <i>Katy Domaille</i>	Date ▶ <i>01/02/2023</i>
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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.