



Compliance With Public Officers Law 73(4)

1146 Boylan Hall
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Form #BCPR007 Effective Date: September 20, 2010

Payee Name	Payee ID
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Please Check one:

- Social Security Number
- Federal Tax Identification Number

The Social Security Number or Federal ID Number/Tax ID (Payee ID) must be indicated to process for payment.

Address	City	State	Zip	Telephone No.	Fax No.

Please indicate if you or any officer of your organization, or any party owning or controlling more than ten (10) percent of your stock if you are a corporation, or any member of your firm or organization is an officer or employee of the State of New York.

- Yes No

Payee Name (print):	Date:
Payee Signature:	
Title:	

For the full text of New York State Public Officers Law 73 (4) please visit www.dos.state.ny.us/ethc/POL73.html

Please return this completed form to the Fiscal and Business Services Center. Failure to provide this information will prevent you from doing business with Brooklyn College.