



Welcome

Welcome to Jobs4Blue, a service offering by VCS - Innovator of workforce optimization software. As the authorized agent for the **Atlantic City Police Department**, we are pleased and excited to introduce Jobs4Blue as your official liaison for all police off duty placement services.

Should you have any questions regarding our authorization, the point of contact for the Atlantic Police Department is **Amy Formica** - who can be reached at **(609) 347-5474** or emailed at ses@acpolice.org.

Onboarding FAQ

- **How to initiate a request for service?**

The VCS preferred way to request service is to submit all requests through the **online Customer Portal**, found at <https://customer.jobs4blue.com>.

If you are a first-time user of the Jobs4Blue service offering, simply contact Jobs4Blue at (877) 425-8330. We are available 24/7 to ensure you always receive the service coverage when needed. After your first job is scheduled, we will register your account to utilize the online Customer Portal.

- **How does Jobs4Blue ensure proper coverage of job requests?**

The fulfillment of all off duty jobs is subject to the availability of police personnel as dictated by the respective rules and regulations of the governing city.

- **When are payments for services due?**

Payment for services requested are due prior to the performance of the job. Jobs4Blue accepts checks, most major credit cards in addition to ACH. A Jobs4Blue 8% service fee is included on all invoices.

All payments will be made to:

Visual Computer Solutions (Jobs4Blue)

4400 US 9 South | Suite 3500 | Freehold, NJ 07728



Account Activation Form
Company Information

Company Name: _____

Address: _____

Payables Contact: _____

Title: _____ Phone: _____

Email: _____

Billing address (if different): _____

*Please Submit this account activation form to the VCS Finance Department via email
finance@vcssoftware.com or fax (732) 730-1661.*

Jobs4Blue Payment

The VCS preferred method of receiving payments for Jobs4Blue is via ACH:

Account number: 69437016

Routing number: 021052053

VCS accepts Credit Card payments (VISA, Master Card, American Express, and Discover) with an additional 4% service charge.

All checks should be made out to Visual Computer Solutions, Inc. and mailed to:

**Visual Computer Solutions, Inc.
4400 US Highway 9 South, Suite 3500
Freehold, NJ 07728**

Following please find our completed Business Registration Certificate & W-9 form, should additional documentation or setup be required, please contact the VCS Finance Department via phone (732-730- 9009 ext. 212), fax (732-730-1661), or email (finance@vcssoftware.com).

**Request for Taxpayer
Identification Number and Certification**

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

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>Visual Computer Solutions, Inc.</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____</p> <p style="font-size: x-small;">Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions)</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="font-size: x-small;">(Applies to accounts maintained outside the United States.)</p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>4400 US Highway 9 South, Suite 3500</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p>Freehold, NJ 07728</p>	
	<p>7 List account number(s) here (optional)</p>	

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.

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

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 5/2/24
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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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

09/12/13

Taxpayer Identification# 223-586-702/000

Dear Business Representative:

Congratulations! You are now registered with the New Jersey Division of Revenue.

Use the Taxpayer Identification Number listed above on all correspondence with the Divisions of Revenue and Taxation, as well as with the Department of Labor (if the business is subject to unemployment withholdings). Your tax returns and payments will be filed under this number, and you will be able to access information about your account by referencing it.

Additionally, please note that State law requires all contractors and subcontractors with Public agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.

We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

If you have any questions or require more information, feel free to call our Registration Hotline at (609)292-9292.

I wish you continued success in your business endeavors.

Sincerely,



James J. Fruscione
Director
New Jersey Division of Revenue

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:

VISUAL COMPUTER SOLUTIONS INC.

TRADE NAME:

ADDRESS:

4400 US HWY 9 S STE 3500
FREEHOLD NJ 07728-4232

SEQUENCE NUMBER:


0086874

EFFECTIVE DATE:

05/20/98

ISSUANCE DATE:

09/12/13



Director
New Jersey Division of Revenue

FORM-BRC

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

(0406) 0205846V