

INTERNAL REVENUE SERVICE



FAX TRANSMISSION
Cover Sheet

Date: September 17, 2020

To: UNITED CEREBRAL PALSY

Address/Organization: _____

Fax Number: (320) 253-6753 Office Number: _____

From: Talbot Jayde C

Address/Organization: Internal Revenue Service

Fax Number: _____ Office Number: _____

Number of pages: *Including cover page*

Subject:

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Department of the Treasury
Internal Revenue Service
Ogden, UT 84201

In reply refer to: 0441611275
Sep 17, 2020 LTR 147C
41-0807591

UNITED CEREBRAL PALSY OF CENTRAL MINNESOTA
24707 COUNTY ROAD 75
SAINT AUGUSTA MN 56301-8782 073

Taxpayer Identification Number: 41-0807591

Form(s):

Dear Taxpayer:

Thank you for your telephone inquiry of September 17th, 2020.

Your Employer Identification Number (EIN) is 41-0807591. Please keep this letter in your permanent records. Enter your name and your EIN on all business federal tax forms and on related correspondence.

If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 7:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely,

MRS. TALBOT
1003680836
Customer Service Representative