

## Heim, Kimber

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**From:** Snider, Carly  
**Sent:** Tuesday, September 28, 2021 1:09 PM  
**To:** Heim, Kimber  
**Subject:** 110412 PCL 006 State of Ohio Forms – Unable to Process JTBD VENTURES () AW

OYE!

### Carly Snider

*Administrative Professional 4*

ODOT District 5 Planning and Engineering  
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**From:** OBM Supplier Operations <[supplier@ohio.gov](mailto:supplier@ohio.gov)>  
**Sent:** Friday, September 24, 2021 3:53 PM  
**To:** Snider, Carly <[Carly.Snider@dot.ohio.gov](mailto:Carly.Snider@dot.ohio.gov)>  
**Subject:** State of Ohio Forms – Unable to Process JTBD VENTURES () AW

Dear JTBD VENTURES,

We have received the paperwork that you submitted to Ohio Shared Services on 9/10/2021 4:35:00 PM. Unfortunately we are unable to process it for the following reason(s):

Form Type: Regular

Name Match/Missing

LINES 1 AND 2, IN SECTION 1 OF THE SUPPLIER FORM, DOES NOT MATCH THE INFORMATION ON THE W-9. PLEASE BE SURE TO LIST ALL BUSINESS NAMES ON THE W-9; THE SUPPLIER FORM SHOULD MATCH THE W-9.

ALSO, PLEASE BE SURE THAT THE WRITING IS CLEAR TO ALLOW FOR ACCURATE PROCESSING. SOME OF THE INFORMATION CANNOT BE READ CLEARLY.

ONCE THE UPDATES HAVE BEEN MADE, PLEASE RESUBMIT FOR PROCESSING.

THANK YOU

Please make required corrections to the form(s) as stated above, save the form(s) then go to <https://Supplier.ohio.gov> to upload and resubmit for processing.

If you have already resubmitted the corrected document please disregard this notice.

For additional information or assistance please contact Ohio Shared Services at 1-877-644-6771.

Thank you,

Ohio Shared Services  
Supplier Operations  
Contact Center 1-877-644-6771

<https://Supplier.ohio.gov>

Reminder:

- • For Medicaid Providers – Please ensure the information on your EFT form and bank verification match the Medicaid Information Technology Systems (MITS) provider portal