

Complete This Form Once For Form 1099s
(this is information about you)

Payers Name:	
Business Address:	
City/State/Zip:	
Payers Federal Identification Number:	

PLEASE FILL OUT FOR EACH PERSON YOU NEED TO SEND A 1099
(MAKE COPIES OF THIS SHEET BEFORE YOU START FILLING IT OUT)

Recipient Name	
(d/b/a if applicable)	
Address	
City State Zip	
Recipient SSN	
Recipient FEIN	
Recipient Phone	
Amount Paid	
For What	
1099-INT?	1099-MISC?
Recipient Name	
(d/b/a if applicable)	
Address	
City State Zip	
Recipient SSN	
Recipient FEIN	
Recipient Phone	
Amount Paid	
For What	
1099-INT?	1099-MISC?
Recipient Name	
(d/b/a if applicable)	
Address	
City State Zip	
Recipient SSN	
Recipient FEIN	
Recipient Phone	
Amount Paid	
For What	
1099-INT?	1099-MISC?