PLEASE MAIL OR FAX THIS COMPLETED PAGE BY <u>JANUARY 19, 2026</u> TO GUARANTEE TIMELY PREPARATION. IF SENDING VIA FAX, PLEASE CALL TO CONFIRM RECEIPT.

General Information

Your name and address as you would like it to appear on form(s).

BUSINESS NAME: _____

CONTACT NAME:		EIN/SSN:	EIN/SSN:		
ADDRESS:		CONTACT PHONE #:			
		_			
	to mail completed 1099s		* No		
	added to the preparation invoice				
All 1099 government co	opies will be electronically filed v	with the IRS. Your copies	will be emailed to yo	ou.	
	1099 RECIP	PIENT INFORMATION	N		
NAME	ADDRESS	SSN/ EIN	AMOUNT PAID	Contract Labor (NEC), Rent, Interest, Dividends or Mortgage Interest	
John Doe	2 Far Drive Westerville, OH 43082	111-22-3333	\$xxx.xx	Contract Labor	

Total amount paid to 1099 vendors (listed above): \$_____