

**ANNE SKALKA
& ASSOCIATES, CPAs**

Certified Public Accountants

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2018

1099 INFORMATION SHEET

Payer/Business Name _____ EIN/SSN _____
Contact Name _____ Phone # _____
Address _____
City _____ State _____ Zip _____

Recipient Name _____ EIN/SSN _____
Address _____
City _____ State _____ Zip _____
Amount Paid _____
1099 Type Miscellaneous 1098 Mortgage Interest Interest
 Rent
 Non Employee Compensation
 Other Income
 Attorney Fees

Recipient Name _____ EIN/SSN _____
Address _____
City _____ State _____ Zip _____
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