

Payor Information

Name: _____

Address: _____

ID number (or EIN): _____

1099 Receipts

				Street Address					
	First, M.I., Last Name/Company Name	SSN/Fed ID		City, St, and Zip	Total Paid	Labor	Rent	Interest	Other*
1									
					*Other Description: _____				
2									
					*Other Description: _____				
3									
					*Other Description: _____				
4									
					*Other Description: _____				
5									
					*Other Description: _____				
6									
					*Other Description: _____				
7									
					*Other Description: _____				
8									
					*Other Description: _____				
9									
					*Other Description: _____				
10									
					*Other Description: _____				
Totals									