

REB Certified Public Accountant

Form 1099 Worksheet

Business Name _____

Date _____

Business Tax ID (for reporting verification purposes) _____

IMPORTANT NOTE: All data fields are MANDATORY for each Recipient to help determine the proper reporting form

Recipient Legal Name	Recipient Tax ID Type (1=EIN, 2=SSN)	Recipient Tax ID	Street Address	City	State	Zip	Amount	Payment Type (1=Check, 2=Cr. Card)	Copy of Form W-9 included if New (Required)	Explanation of Expense

EXAMPLES

John Smith	1	123-45-6789	1256 Lank Dr.	Phoenix	AZ	85016	2,000.00	1	Yes	Consulting
Holding Tank LLC	2	21-4567895	655 Eden Park Dr.	Cincinnati	OH	45202	26,500.00	1	No	Rent