

P A Y O R	Name: _____	Social Security #: _____
	Address: _____	Federal ID #: _____
	City: _____	State: _____
	Zip Code: _____	Telephone: _____

### INFORMATION NEEDED FOR 1099 FORMS

Once again, you will need to send a Form 1099 to anyone you paid more than \$600 for interest, rent, custom work or any other service. This must be done for all individuals who are not incorporated. Failure to file penalties of up to \$520 per form may be assessed if you are audited.

1 0 9 9	Name: _____	Social Security #: _____
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	What Paid For: _____	Amount Paid: \$ _____
1 0 9 9	Name: _____	Social Security #: _____
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	What Paid For: _____	Amount Paid: \$ _____
1 0 9 9	Name: _____	Social Security #: _____
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	What Paid For: _____	Amount Paid: \$ _____
1 0 9 9	Name: _____	Social Security #: _____
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	What Paid For: _____	Amount Paid: \$ _____
1 0 9 9	Name: _____	Social Security #: _____
	Address: _____	
	City: _____	State: _____ Zip Code: _____
	What Paid For: _____	Amount Paid: \$ _____

## INFORMATION NEEDED FOR W-2 FORMS

W-2 forms need to be done for any employee, including spouses and children, even if paid in commodities. If you wish to have us do your W-2's, please complete the form below. All forms must be sent by January 31<sup>st</sup>.

W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash
W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash
W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash
W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash
W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash
W 2	Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Social Security #: _____ Date of Birth: _____ Amount of Wage: \$ _____ Federal Withholding: \$ _____ FICA Withholding: \$ _____ State Withholding: \$ _____ Services Paid For With: _____ Commodities _____ Cash