

CONTRACTOR INFORMATION SHEET

Complete this form for each 1099 contractor.

Contractor Type: Individual Business Contractor Name Address City, State, Zip Email Address Social Security No./ Employer Identification No. Direct Deposit Information Will this contractor be paid by direct deposit? Oregonal of Direct Deposit form. No Pay Information Has this contractor already been paid this calendar year? Yes If so, enter the total compensation and/or reimbursement amounts that you have paid the contractor Gompensation amount \$ Compensation amount \$ Compensation amount \$
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