Form 1099-C (Rev. 1-2022) Cat. No. 26280W www.irs.gov/Form1099C Department of the Treasury - Internal Revenue Service

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* CREDITOR'S T.I.N. (TAXPAYER IDENTIFICATION NUMBER) / E.I.N. CAN BE FOUND BY A SEARCH ON SEC.GOV OR WITH THE SECRETARY OF STATE. FOR COURTS. YOU YAMITLEAVE BLANK.

** THE TUUOMA SHOULD BETHE TOTAL THUUMA PAID TO THE COMPANY HTIW YOUR INSTRUMENT (EITHER A4V, PROMISSORY NOTE, OR ${ t BILL}$ OF EXCHANGE).

MUST BE FILLED OUT ON CARBON COPY ORDERED FROM THE I.R.S. (FREE TO ORDER)

X CORRECTED (if checked)

A CORNE	CTED (II CHECKEU)		
CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	Date of identifiable event DUE DATE	OMB No. 1545-2281	
COMPANY / COURT NAME HERE	2 Amount of debt discharged	Form 1099-C	Cancellation
1234 THEIR ADDRESS ST.	\$ AMOUNT**	(Rev. January 2022)	of Debt
CITY / TOWN, ST 12345	3 Interest, if included in box 2 \$ -0-	For calendar year 20 21	
CREDITOR'S TIN DEBTOR'S TIN	4 Debt description		Сору В
(LEAVE BLANK) SSN-XX-XXXX	COURT A	CTION OR	For Debtor
DEBTOR'S name FIRST MIDDLE LAST	DEBT COLLECTION OR UTILITY SERVICE		This is important tax information and is being furnished to the IRS. If you are required to file a
Street address (including apt. no.) 1234 YOUR OF 1234 POST OFFICE ADDRESS City or town, state or province, country, and ZIP or foreign postal code CITY / TOWN, ST 12345	5 If checked, the debtor was personally liable for repayment of the debt		return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines
Account number (see instructions) ACCOUNT / CASE NUMBER	6 Identifiable event code B	7 Fair market value of pro \$ AMOUNT**	perty that it has not been

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FOR COURTS, YOU MAY LEAVE

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Department of the Treasury - Internal Revenue Service

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(keep for your records)

Form 1099-C (Rev. 1-2022)

** THE AMOUNT SHOULD BE THE TOTAL AMOUNT
PAID TO THE COMPANY WITH YOUR INSTRUMENT
(EITHER A4V, PROMISSORY NOTE, OR BILL OF EXCHANGE).

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☐ VOID X CORRE	CTED		
CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	1 Date of identifiable event DUE DATE	OMB No. 1545-2281	
COMPANY / COURT NAME HERE	2 Amount of debt discharged \$ AMOUNT * *	Form 1099-C (Rev. January 2022)	Cancellation of Debt
1234 THEIR ADDRESS ST. CITY / TOWN, ST 12345	3 Interest, if included in box 2 \$ -0-	For calendar year 20 21	or Debt
CREDITOR'S TIN (LEAVE BLANK) DEBTOR'S TIN SSN-XX-XXXX	4 Debt description COURT A	CTION OR	Copy C For Creditor
DEBTOR'S name FIRST MIDDLE LAST	DEBT COLLECTION OR UTILITY SERVICE		For Privacy Act and Paperwork
Street address (including apt. no.) 1234 YOUR OF 1234 POST OFFICE ADDRESS City or town, state or province, country, and ZIP or foreign postal code CITY / TOWN, ST 12345	5 Check here if the debtor was personally liable for repayment of the debt		Reduction Act Notice, see the current General Instructions for Certain Information
Account number (see instructions) ACCOUNT / CASE NUMBER	6 Identifiable event code B	7 Fair market value of property \$ AMOUNT**	Returns.

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