

2025 1099 Information

Your Name or Business Name: _____

Address: _____

Employer ID: _____ Telephone # _____

Payee Name			SSN/EIN		
Payee Address					
	City		State		Zip
Rent	Custom		Other (Describe)		

Payee Name			SSN/EIN		
Payee Address					
	City		State		Zip
Rent	Custom		Other (Describe)		

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	City		State		Zip
Rent	Custom		Other (Describe)		

By completing this form you are giving authorization for Jay Hansen CPA to electronically file your forms.