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VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.				1 Rents	OMB No. 1545-0115 2019 Form 1099-MISC	Miscellaneous Income	
				\$			
				2 Royalties			
PAYER'S TIN				3 Other income	4 Federal income tax withheld	Copy A For Internal Revenue Service Center	
				\$	\$		
				5 Fishing boat proceeds	6 Medical and health care payments		
RECIPIENT'S name				7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
				\$	\$		
				9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds		
Street address (including apt. no.)				11	12		
				\$	\$		
				City or town, state or province, country, and ZIP or foreign postal code			
\$	\$						
Account number (see instructions)	FATCA filing requirement <input type="checkbox"/>	2nd TIN not <input type="checkbox"/>	15a Section 409A deferrals				
\$	\$	\$	\$	\$	\$	\$	\$

Form **1099-MISC** 41-0852411 www.irs.gov/Form1099MISC Department of the Treasury - Internal Revenue Service
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Form **1099-MISC** LMA 41-0852411 5110 www.irs.gov/Form1099MISC Department of the Treasury - Internal Revenue Service

DETACH BEFORE MAILING
MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS