2020 *1099 Worksheet*

CLIENT INFORMATION:

Name _____   **Address** _____

FEIN/SS# _____   **City, State, ZIP** _____

WI Withholding Number (15 digits – starts with 036) _____

RECIPIENT INFORMATION:

Name: _____	Name: _____
dba: _____	dba: _____
Address: _____	Address: _____
_____	_____
SSN/Fed ID: _____	SSN/Fed ID: _____
Amount: $ _____ NEC RENT INT DIV *(Circle one)*	Amount: $ _____ NEC RENT INT DIV *(Circle one)*
Name: _____	Name: _____
dba: _____	dba: _____
Address: _____	Address: _____
_____	_____
SSN/Fed ID: _____	SSN/Fed ID: _____
Amount: $ _____ NEC RENT INT DIV *(Circle one)*	Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*

Name: _____

dba: _____

Address: _____

_____

SSN/Fed ID: _____

Amount: $ _____ NEC RENT INT DIV *(Circle one)*