## **DUE DATE JANUARY 8, 2024 1099 WORKSHEET**

YOUR (PAYER) BUSINESS NAME							
				Recipients Name, Address, & Zip Code	Recipient's I.D. Number ( <u>EIN or SSN)</u>	Service Rent <u>Interest</u>	Amount of <u>Payment</u>
				1			
2.							
3							
4							
5							
6							
7							
8.							

RETURN TO: MAIN STREET TAX & ACCOUNTING SERVICES, INC.

P.O. BOX 219, BERNVILLE, PA 19506

mainstreettax@mainstreettaxandaccounting.com In subject area of email please note 1099

(610) 488-0295 **OFFICE** 

(610) 488-6693 **FAX**