1099 Check In Sheet

Name:	CONTROL OF THE ACCUSE AND ACCUSE
Date:	
Date of Completion:	

Note: If we did them last year just verify that everything is the same.

1. What is the client name?

- Social security number or Tax ID number
- Address
- Phone number

2. What is the recipients (Payee) name?

- Social security number or Tax ID number
- Address

3. Circle one:

- Services 1099 NEC
- Rents 1099 MISC

4. Amount paid -