

1099 / 1098 QUESTIONNAIRE FOR 2019

NAME _____ PHONE _____ SSN or EIN _____

	PREVIOUS RECIPIENTS OF 1099s & 1098s:	REASON:	2019 AMOUNT:
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
7.			\$
8.			\$
9.			\$
10.			\$

REASON KEY:

L - Labor/Parts

R - Rent

Int - Interest

Write in next to name key letter(s)

PLEASE PRINT CLEARLY

NEW RECIPIENTS FOR 2019

For ID# - If it is an Individual - Use Soc. Sec. No#

For ID# - If it is a Company Name - Use EIN No#

1.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
2.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
3.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
4.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
5.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
6.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
7.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$
8.	NAME:	ADDRESS:	ID#:	AMOUNT:
			REASON:	\$

Return To:

Sonrise PayMaster\$ LLC
 419 Cumberland St. Suite 1
 Lebanon PA 17042
 Phone: (717) 820-4146
 Fax: (717) 277-5021
 Email: infor@paymasterspa.com

NAME: _____

ADDRESS: _____
