| | | □ \ | VOID | | CORRE | CIED | | | | |
|---|-------|--------|--------------|--------|--------------|---|--|------------|---|--|
| PAYER'S name, street address, city or town, state or province, country, ZIF | | | | | | | OMB No. 1545-0116 | | | |
| or foreign postal code, and telephone no. | | | | | | | Form 1099-NEC | | Nonomployoo | |
| | | | | | | | (Rev. January 2022) | | Nonemployee Compensation | |
| | | | | | | | For calendar year | | Compensation | |
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| PAYER'S TIN | REG | CIPIE | NT'S TIN | | | 1 Nonemployee compen | sation | | Copy C | |
| RECIPIENT'S name | | | | | | \$ Payor made direct on | log totaling \$5 000 or more of | - | For Payer | |
| NEOFIENT S Halle | | | | | | 2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale | | | For Privacy Act and | |
| | | | | | | 3 | Paperwork Reduction Act Notice, see the | | | |
| Street address (including apt. no.) | | | | | | | current General | | | |
| | | | | | | 4 Federal income tax w | Information Returns. | | | |
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| Form 1099-NEC (Rev. 1-2022) | | | ١ | www.i | irs.gov/Forr | | Department of the | Treasury - | - Internal Revenue Service | |
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| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. | | | | | Juliuy, Zir | | OMB No. 1545-0116 | | | |
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| Form 1099-NEC (Rev. 1-2022) | | | \ | www.i | irs.gov/Forr | n1099NEC | Department of the | Treasury - | - Internal Revenue Service | |
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