Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555 2 Reciplex Sax Sax Sax Sax Sax Sax Sax Sax Sax Sa	9595	☐ VOID ☐	CORRE	CTED		
Address Line 1 City, State 00000 (555) 555-5555 RECIPIENT'S identification number RECIPIENT'S identification number RECIPIENT'S identification number RECIPIENT'S identification number S	PAYER'S name, street address, city, state, ZIP code, and telephone no.			1 Rents	OMB No. 1545-0115	
Second identification number Second identification S	Address Line 1 City, State 00000			\$ 2 Royalties		Income
PAYER'S federal identification number RECIPIENT'S identification number Similar	(555) 555-5555			3 Other income		held Copy A
number number number				\$		
## Street Recipient Name Street Recipient Name Street Name Street Recipient Name Street Recipient Name Street Name Street Recipient Name Street			ion	5 Fishing boat proceeds	6 Medical and health care payr	
RECIPIENTS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Tiambo.	Harrison				Service Ceriter
Street Recipient Name Street Recipient Name 9 Payer made direct sales of \$5,000 \$9,7875,2833,283 products to a buyer (recipient) for resale \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				\$	\$	File with Form 1096.
Street 3	RECIPI X X\$X;XXXX	YY-YYYY	YY3	7 Nonemployee compensation		For Privacy Act and Paperwork
Account number (see instructions) City, State 11111 2nd TIN not payments \$ \$ \$ \$ 14 Gross proceeds paid to an attorney \$ \$ 15a Sec XXXXXXXXXX Seferrals 15b Section 409A income \$ \$ 16 State tax withheld \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Street Recipient Name			products to a buyer		ds 2012 General Instructions for Certain
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	City, st Street Address Line 1			11	12	
15a Sec XXXX Seferrals 15b Section 409A income 16 State tax withheld 17 State/Payer's state no. 18 State income \$ \$ \$ \$ \$	Account number (see instructions) City, State 11111		2nd TIN not	· ·		o an
\$ \$ \$ \$ \$				\$	\$	
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				\$		\$
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Form 1099-MISC

Cat. No. 14425J

Department of the Treasury - Internal Revenue Service

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9595 VOID CORRECTED								
PAYER'S name, street address, city, state, ZIP code, and telephone no.			1 Rents	OMB No. 1545-0115				
Payer Name, LLC Address Line 1 City, State 00000			\$ 2 Royalties	20 12 Form 1099-MISC	Miscellaneous Income			
(555) 555-5555			3 Other income	4 Federal income tax withhele	Copy A			
			\$	\$	For			
PAYER'S federal identification	RECIPIENT'S identifica	tion	5 Fishing boat proceeds	6 Medical and health care payment				
number	number				Service Center			
			\$	\$	File with Form 1096.			
RECIPIAN SAN YY-YYYYY2			7 Nonemployee compensation	8 Substitute payments in lieu dividends or interest	For Privacy Act			
				dividends of interest	and Paperwork Reduction Act			
			\$	\$				
Street Recipient Name			T	Φ10 Crop insurance proceeds	Notice, see the 2012 General			
otteet addressi(inodding apt. 110.)			9 Payer made direct sales of \$5,000 999 00 nsumer	l crop mountaine processe	Instructions for			
			products to a buyer (recipient) for resale ▶	\$	Certain			
City, stStreet FAddress Line 1			11	12	Information			
					Returns.			
Account number (see instructions) City, State 11111		2nd TIN not	. 13 Excess golden parachute payments	14 Gross proceeds paid to an attorney				
•			•	•				
15a SecXoX 4X9X Xeferrals	15b Section 409A incom	ie ne	16 State tax withheld	17 State/Payer's state no.	18 State income			
	355.5	· -	\$	11 212101 4701 2 31413 1101	\$			
\$	\$		\$		\$			