		ECTED (if checked)	1		
PAYER'S name, street address, city of	or town, state or province, country, ZIF		OMB No. 1545-0116		
or foreign postal code, and telephone no. Quitzon and Sons 8004 Tuan Street			Form 1099-NEC		
				Nonemple	_
New Daniella, CT 46847			(Rev. January 2024)	Compensa	atior
555-867-5309			For calendar year 2024		
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee comper		Co	ру Е
00-0342653	000-69-8152	\$:	200.00 For Rec	ipien
RECIPIENT'S name Gay Gerhold		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale		information and furnished to the IRS.	This is important tay information and is being furnished to the IRS. If you are
_		3		required to file a negligence penalty	
Street address (including apt. no.) 165 Cecil Locks City or town, state or province, country, and ZIP or foreign postal code Langmouth, GA 17444		4 Federal income tax withheld \$ 300.00		sanction may be im	sanction may be imposed or you if this income is taxable and the IRS determines that i
				and the IRS determine	
		5 State tax withheld	6 State/Payer's state no.	has not been 7 State income	reported
Account number (see instructions)		\$ 400.00	AA/24-387123		00.00
090-0	6204-5	\$		 \$	