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PAYER'S name, street address, city o or foreign postal code, and telephone						OMB No. 1545-0116 Form <b>1099-NEC</b>			
or foldigit postal code, and telephone no.								Nonemployee	
						(Rev. January 2022)		Compensation	
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				\$				For Internal Revenue	
RECIPIENT'S name				2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale				Service Center File with Form 1096.	
				3				For Privacy Act and Paperwork Reduction Act	
Street address (including apt. no.)				4 Federal income tax withheld				Notice, see the current General Instructions for Certain Information	
City or town, state or province, country, and ZIP or foreign postal code				5 State tax withheld 6 State/Payer's state no.				Returns. 7 State income	
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