

CONTRACTOR INFORMATION SHEET

Complete this form for each 1099 contractor.

General Information

Contractor Type: Individual Business

Contractor Name _____

Address _____

City, State, Zip _____

Email Address _____

Social Security No./

Employer Identification No. _____

Direct Deposit Information

Will this contractor be paid by direct deposit?

- Yes If so, complete the Authorization of Direct Deposit form.
 No

Pay Information

Has this contractor already been paid this calendar year?

- Yes

If so, enter the total compensation and/or reimbursement amounts that you have paid the contractor during the current year.

- No

Compensation amount \$ _____

Reimbursement amount \$ _____

NOTES