

SECTION I – PAYER’S INFORMATION

COMPANY NAME OR PAYER’S NAME	COMPANY/PAYER’S ADDRESS
COMPANY FEDERAL ID NUMBER OR PAYER’S SSN	COMPANY/PAYER’S CITY, STATE, ZIP
CONTACT NAME	COMPANY/PAYER’S EMAIL ADDRESS
COMPANY/PAYER’S CONTACT PHONE NUMBER	COMPANY/PAYER’S FAX NUMBER (if applicable)

PAYMENT METHOD: Pay at Pick Up ACH* Credit Card* *fill out ACH/CC page

COMPANY COPY DELIVERY METHOD: LISCIO Client File

RECIPIENT DELIVERY METHOD: by TAXESPLUS, INC. (postage rates apply) & Included in final Client Copy

By signing below you acknowledge that you are engaging TAXESPLUS, INC. to prepare 1099 Series Forms for Tax Year 2022. TAXESPLUS, INC. will prepare, from information provided by you, Federal and State (if applicable) Forms 1099 and Transmittal Form 1096. You acknowledge that you are solely responsible for the accuracy and completeness of your information. We will not audit, review, compile or otherwise verify the data you submit although we may ask you to clarify some of the information. You affirm that all information which you furnished to TAXESPLUS, INC. is true, complete and accurate. In addition, you have and will retain all necessary written support and documentation for that information. If you have forms or payees other than those specifically listed we will not be preparing those forms unless specifically requested by you, in writing in a separate engagement letter, to prepare those forms. Any other required services, forms or other actions on our part require a separate engagement letter. In the absence of written communications from us documenting such services, our services will be limited to and governed by the terms of this engagement letter.

I DO NOT NEED TAXESPLUS, INC. TO PREPARE OUR FORMS 1099s/1096

PAYER SIGNATURE	DATE
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FOR OFFICE USE ONLY – COMPLETED BY TAXESPLUS TEAM

Description	Date	Initials
Received Initial Information from Client		
Received Complete Information from Client & Setup Jetpack Job		
Processed 1099 Forms # of 1099’s & TYPE _____		
Final Review		
Assembly (default electronic copy) <input type="checkbox"/> Paper File		
Client Copies <input type="checkbox"/> Picked Up <input type="checkbox"/> LISCIO <input type="checkbox"/> Client File		
Recipient Copies Mailed - Postage _____ x FORMS _____		
Invoice # _____ Payment Received		
NEC - Federal/State 1096 Forms Submitted: <input type="checkbox"/> e-file <input type="checkbox"/> paper file <input type="checkbox"/> e-confirm		
_____ Federal/State 1096 Forms Submitted: <input type="checkbox"/> e-file <input type="checkbox"/> paper file <input type="checkbox"/> e-confirm		

① ACH AUTHORIZATION – 1099 Preparation Fee

ACH withdrawal approval: I authorize TaxesPlus, Inc. to withdraw my **2022 1099-Form preparation fee** from my account with the information provided below:

(Company Name)	(print authorized name)
(date)	(authorized signature)
(Bank Routing Number)	(Bank Account No.)

*****Attach copy of blank check *****

② CREDIT CARD AUTHORIZATION – 1099 Preparation Fee

Credit Card approval: I authorize TaxesPlus, Inc. to charge my **2022 1099-Form preparation fee** to my credit card with the information provided below:

(Credit Card Number)	(Expiration Date)	(Security Code)
(Name as it appears on Credit Card)	(authorized signature)	
(Credit Card Billing Address)	(date)	

A COPY OF THE PAID INVOICE WILL BE INCLUDED IN YOUR 2022 CLIENT PACKET

SECTION II – RECIPIENT’S INFORMATION							
Recipient’s Name (include DBA)	Recipient’s Federal ID (SSN or EIN)	Address			Amount Paid	Type of Payment (please check only ONE box)	Federal Income Tax Withheld from Recipient
	# _____ <input type="checkbox"/> Completed W9 Form* If LLC, how are they taxed? <input type="checkbox"/> Sole Prop./Sched. C (SSN) <input type="checkbox"/> Partnership (EIN) <input type="checkbox"/> Corporation (EIN)	Address	Suite or Apt No		\$	<input type="checkbox"/> Nonemployee Compensation <input type="checkbox"/> Rents <input type="checkbox"/> Other Income <input type="checkbox"/> Gross Proceeds Paid to An Attorney <input type="checkbox"/> Interest Income	\$
	City	ST	Zip				
	# _____ <input type="checkbox"/> Completed W9 Form* If LLC, how are they taxed? <input type="checkbox"/> Sole Prop./Sched. C (SSN) <input type="checkbox"/> Partnership (EIN) <input type="checkbox"/> Corporation (EIN)	Address	Suite or Apt No		\$	<input type="checkbox"/> Nonemployee Compensation <input type="checkbox"/> Rents <input type="checkbox"/> Other Income <input type="checkbox"/> Gross Proceeds Paid to An Attorney <input type="checkbox"/> Interest Income	\$
	City	ST	Zip				
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	City	ST	Zip				
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	City	ST	Zip				

*Please include copies of all completed W-9 Forms

Please send back to **Donna Langer – inside of LISCIO. Please request set up inside LISCIO if you are not setup.**