

1099 ORDER FORM

By submitting this form, I hereby authorize Crowe-Mallette & Associates to prepare, file, and send by US Mail the following 1099's. I am responsible for all related charges and costs and understand that those costs must be paid in advance of the forms being released.

NOTE: 1099 Requests must be submitted by January 10, 2025. Information/Requests submitted after January 10th will incur a RUSH FEE. Requests/Information submitted after January 10<sup>th</sup> may not be processed in time to meet the filing deadline.

Accepted By (Client Signature) \_\_\_\_\_

Date \_\_\_\_\_

Payee Legal Name	EIN/Social Security Number	Mailing Address	City	State	Zip	Amount Paid in 2024