

# 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?**

Direct deposit       Yes     No    If yes, attach completed Authorization of Direct Deposit form.

## Pay Information

**Has this contractor already been paid this calendar year?**

Yes     No

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

Compensation amount \$ \_\_\_\_\_

Reimbursement amount \$ \_\_\_\_\_

## Notes