

7171

VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. CobraVision LLC 1105 309th Pl Ocean Park WA 98640 6128050829	OMB No. 1545-0116
	Form 1099-NEC (Rev. January 2022)
	For calendar year 20 <u>23</u>

Nonemployee Compensation

PAYER'S TIN 82-4305960	RECIPIENT'S TIN 185435939	1 Nonemployee compensation \$ 19020.00	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
RECIPIENT'S name Ismat Saira Gillani		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	
Street address (including apt. no.) 5094 Hale drive		3	
City or town, state or province, country, and ZIP or foreign postal code Columbus GA 31904		4 Federal income tax withheld \$	
Account number (see instructions)	2nd TIN not. <input type="checkbox"/>	5 State tax withheld \$	
		6 State/Payer's state no.	
		7 State income \$	

CORRECTED (if checked)

Nonemployee Compensation

**Copy B
For Recipient**

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

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