

For Official Use Only

Form **1096**  
Department of the Treasury  
Internal Revenue Service

# Annual Summary and Transmittal of U.S. Information Returns

# 1981

PAYER'S  
Federal  
identifying  
number

Enter  
number of  
documents

Place an "X" in the proper box to identify type of document being transmitted

1099 BCD 87	1099 DIV 91	1099 F 90	1099 INT 92	1099 L 93	1099 MED 94	1099 MISC 95	1099 NEC 83	1099 OID 96	1099 PATR 97	1099 R 98	1099 UC 81	1087 DIV 71	1087 INT 72	1087 MED 75	1087 MISC 77	1027 OID 78
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69

Type or print PAYER'S name, address, and ZIP code below (Name must align with arrow).

Name ▶

All documents are: (Place an "X" in the proper box. See instructions.)

All documents are: (Place an "X" in the proper box. See instructions.)

Original	Corrected	With taxpayer identifying no.	Without taxpayer identifying no.

(Magnetic tape filers: See the applicable Revenue Procedures regarding transmittal of returns on magnetic tape.)

Under penalties of perjury, I declare that I have examined this return, including accompanying documents and to the best of my knowledge and belief, it is true, correct, and complete. In the case of documents without recipients' identifying numbers I have complied with the requirements of the law by requesting such numbers from the recipients, but did not receive them.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

313-104-1

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