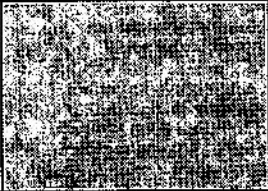
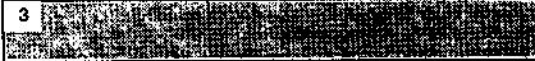


CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. TOWN OF CAMP VERDE 395 S. MAIN ST. CAMP VERDE, AZ 86322				OMB No. 1545-0116 2021 Form 1099-NEC	Nonemployee Compensation
PAYER'S TIN 86-0573698	RECIPIENT'S TIN 527-73-2012	1 Nonemployee compensation \$ 162229.73		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.	
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code STEVEN C. COURY P.O. BOX 620 PAYSON, AZ 86647		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>			
Account number (see instructions) 003000		3 			
		4 Federal income tax withheld \$			
		5 State tax withheld \$	6 State/Payer's state no. AZ		7 State income \$

Form **1099-NEC**

(keep for your records)

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service