



**UC IRVINE**

**1099-MISC/1099-INT  
Tax Request Form**

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**INDIVIDUALS:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Signature: \_\_\_\_\_ Tax Year: \_\_\_\_\_

**COMPANY VENDORS:**

Company Name: \_\_\_\_\_ Federal Tax I.D. #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Tax Year: \_\_\_\_\_

**For All Request Please Complete Below:**

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email Address For Confirmation Only: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUESTED FORM(S):**

Duplicate copy of 1099-MISC/INT

Correction to 1099-MISC/INT form

FAX, MAIL OR EMAIL TO:  
UC IRVINE - ACCOUNTS PAYABLE  
ATTENTION: TANYA HARRIS  
120 THEORY, SUITE 200  
IRVINE, CA 92697-1050  
FAX: (949) 824-2098  
[THARRIS@UCI.EDU](mailto:THARRIS@UCI.EDU)