2022 W2/1099 ORDER FORM

Order Before October 15th, and get a 10% Discount on W2/1099 Forms Only Not Envelopes

LASER TAX FORMS - EACH PACK HAS 50 SHEETS

Item	Form Type	Description	Cost Per	#	Tota	al
#			Pack	Packs	Cos	st
25	W2 - Copy A	2 Forms Per Sheet for 2 Employees	\$9.75			
38	W2 - Blank Perf 2-UP	2 Forms Per Sheet for 1 Employee	\$8.75			
37	W2 - Blank Perf 4-UP	4 Forms Per Sheet for 1 Employee	\$8.75			
29	1099 MISC - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
44	1099 NEC – Copy A	3 Forms Per Sheet for 3 Recipients	\$9.75			
28	1099 INT - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
27	1099 DIV - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
26	1099-B - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
30	1099-S - Copy A	3 Forms Per Sheet for 3 Recipients	\$9.75			
33	1099-R - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
40	1099 - Blank Perf 2-UP for	2 Forms Per Sheet for 1 Recipient	\$8.75			
	MISC/DIV/INT/B/R & 1098					
36	1099 - Blank Perf 3-UP for NEC/S	3 Forms Per Sheet for 1 Recipient	\$8.75			
31	W3 - Copy A	1 Form Per Sheet	\$9.75			
32	1096 - Copy A	1 Form Per Sheet	\$9.75			
35	1098 - Copy A	2 Forms Per Sheet for 2 Recipients	\$9.75			
42	W2c - Copy A	1 Form Per Sheet for 1 Employee	\$9.75			
43	W3c - Copy A	1 Form Per Sheet	\$9.75			
Total Cost*						
10% Discount for Orders Received Before October 15 th					()
Total Forms Amount						

DOUBLE WINDOW ENVELOPES (ORDER IN INCREMENTS OF 100)

Item #	Description	Quantity	Total Cost	
7 – DWCL	Laser W2 Envelopes - 2-UP			Price Chart for
34 - DW4S	Laser W2 Envelopes - 4-UP			Envelopes is
21 - DW19	Laser 1099 NEC/S Envelopes - 3-UP			Located on
41 - DWMR	Laser 1099 MISC/DIV/INT/B/R & 1098's			Laser Tax Forms
	Total Envelop	e Amount		Example Page

TOTAL FORM & ENVELOPE ORDER

Total Forms Amount	
Total Envelope Amount	
Shipping and Handling	\$25.00
State Taxes: CA 8%, FL 7% & TX 6.25%	
Total Amount of Order	

Please return this form along with a check to: *P.C. Software Accounting Inc*, *1219 Sarasota Center Blvd.*, *Sarasota FL 34240*. If you prefer to pay with a credit card please fill in the card information in the **Billing & Shipping Information Section** and either mail or fax the form to (941) 896 9865.

BILLING & SHIPPING INFORMATION

Company Name:		
Contact Person:	Telephone:	
Street Address:		
Street Address.		
City, State & Zip:		
only, on an on an en		
Credit Card #:	Expiration Date:	PIN #:
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Card Holder:	· · · · · · · · · · · · · · · · · · ·	
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Card Holder: Billing Address on Card:	· · · · · · · · · · · · · · · · · · ·	
Billing Address on Card:		