

VOID  CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.  <b>Calvary World Outreach Church P.O. Box 123 Aberdeen, MD 21001</b>		1 Rents \$ 2 Royalties \$ 3 Other Income \$ <b>\$280.00</b>	OMB No. 1545-0115  <b>2005</b>  Form 1099-MISC	<b>Miscellaneous Income</b>	
PAYER'S Federal identification number <b>52-2165630</b>	RECIPIENT'S identification number <b>593-24-1555</b>	4 Federal Income tax withheld \$	5 Fishing boat proceeds \$		
RECIPIENT'S name  <b>Bell Atlantic</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$		
Street address (including apt. no.)  <b>P.O. Box 129</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$	10 Crop insurance proceeds \$		
City, state, and ZIP code <b>Baltimore, MD 21001</b>		11	12		
Account number (optional) <b>222-222-222-222</b>		13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$		
15	16 State tax withheld \$	17 State/Payer's state no.	18 State income \$		
	\$		\$		

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PAYER'S name, street address, city, state, ZIP code and telephone no.  <b>Calvary World Outreach Church</b> <b>P.O. Box 123</b> <b>Aberdeen, MD 21001</b>		1 Rents \$	OMB No. 1545-0115  <b>2005</b>	<b>Miscellaneous Income</b>
		2 Royalties \$	Form 1099-MISC	
		3 Other Income \$ <b>\$280.00</b>	4 Federal Income tax withheld \$	
PAYER'S Federal identification number  <b>52-2165630</b>	RECIPIENT'S identification number  <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	<b>Copy B For Receipt</b>  <b>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a tax 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.</b>
RECIPIENT'S name  <b>Bell Atlantic</b>	7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$		
Street address (including apt. no.) <b>P.O. Box 129</b>	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
City, state, and ZIP code <b>Baltimore, MD 21001</b>	11	12		
Account number (optional) <b>222-222-222-222</b>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$		
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		2 Royalties \$		
		3 Other Income <b>\$280.00</b> \$	4 Federal Income tax withheld \$	<b>Copy C For Payer</b>
PAYER'S Federal identification number <b>52-2165630</b>	RECIPIENT'S identification number <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	
RECIPIENT'S name  <b>Bell Atlantic</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$	<b>For Privacy Act and Paperwork Reduction Act Notice, see the 2002 general Instructions for Forms 1099, 1098, 5498, and W-2G</b>
Street address (including apt. no.) <b>P.O. Box 129</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$	10 Crop insurance proceeds \$	
City, state, and ZIP code <b>Baltimore, MD 21001</b>		11 	12 	
Account number (optional) <b>222-222-222-222</b>	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
15		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$
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		2 Royalties \$			
		3 Other Income \$ <b>\$280.00</b>	4 Federal Income tax withheld \$		
PAYER'S Federal identification number  <b>52-2165630</b>	RECIPIENT'S identification number  <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$		
RECIPIENT'S name  <b>Bell Atlantic</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$		<b>Copy 2 To be filed with recipient's state income tax return, when required.</b>
Street address (including apt.no.)  <b>P.O. Box 129</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
City, state, and ZIP code  <b>Baltimore, MD 21001</b>		11	12		
Account number (optional)  <b>222-222-222-222</b>	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$		
15		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$	
		\$		\$	

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		2 Royalties \$		
		3 Other Income \$ <b>\$110.00</b>	4 Federal income tax withheld \$	
PAYER'S Federal identification number <b>52-2165630</b>	RECIPIENT'S identification number <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	<b>Copy 1 For State Tax Department</b>
RECIPIENT'S name <b>Ralph Hawkins Briarcliff Free Will Baptist Church</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$	
Street address (including apt. no.) <b>6786 Meadow Crest Lane</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$	
City, state, and ZIP code <b>Sanbornton, NH 03269</b>		11	12	
Account number (optional)		13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
15		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$
		\$		\$

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PAYER'S name, street address, city, state, ZIP code and telephone no.  <b>Calvary World Outreach Church</b> <b>P.O. Box 123</b> <b>Aberdeen, MD 21001</b>		1 Rents \$	OMB No. 1545-0115  <b>2005</b>	<b>Miscellaneous Income</b>
		2 Royalties \$	Form 1099-MISC	
		3 Other Income \$ <b>\$110.00</b>	4 Federal Income tax withheld \$	
PAYER'S Federal identification number  <b>52-2165630</b>	RECIPIENT'S identification number  <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	<b>Copy B For Receipt</b>  <b>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a tax 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.</b>
RECIPIENT'S name  <b>Ralph Hawkins</b> <b>Briarcliff Free Will Baptist Church</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$	
Street address (including apt. no.) <b>6786 Meadow Crest Lane</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$	10 Crop insurance proceeds \$	
City, state, and ZIP code <b>Sanbornton, NH 03269</b>		11	12	
Account number (optional)		13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
15	16 State tax withheld \$	17 State/Payer's state no.	18 State income \$	

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		2 Royalties \$		
		3 Other Income \$ <b>\$110.00</b>	4 Federal Income tax withheld \$	<b>Copy C For Payer</b>
PAYER'S Federal identification number <b>52-2165630</b>	RECIPIENT'S identification number <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	
RECIPIENT'S name  <b>Ralph                      Hawkins Briarcliff Free Will Baptist Church</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$	<b>For Privacy Act and Paperwork Reduction Act Notice, see the 2002 general Instructions for Forms 1099, 1098, 5498, and W-2G</b>
Street address (including apt. no.) <b>6786 Meadow Crest Lane</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$	
City, state, and ZIP code <b>Sanbornton, NH 03269</b>		11	12	
Account number (optional)	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
15		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$
		\$		\$

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		2 Royalties \$			
		3 Other Income \$ <b>\$110.00</b>	4 Federal Income tax withheld \$		
PAYER'S Federal identification number  <b>52-2165630</b>	RECIPIENT'S identification number  <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$		
RECIPIENT'S name  <b>Ralph Hawkins Briarcliff Free Will Baptist Church</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$		<b>Copy 2 To be filed with recipient's state income tax return, when required.</b>
Street address (including apt.no.)  <b>6786 Meadow Crest Lane</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
City, state, and ZIP code  <b>Sanbornton, NH 03269</b>		11	12		
Account number (optional)	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$		
15		16 State tax withheld \$	17 State/Payer's state no.		18 State income \$
		\$			\$

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		2 Royalties \$		
		3 Other Income \$ <b>\$80.00</b>	4 Federal income tax withheld \$	<b>Copy 1 For State Tax Department</b>
PAYER'S Federal identification number <b>52-2165630</b>	RECIPIENT'S identification number <b>593-24-1555</b>	5 Fishing boat proceeds \$	6 Medical and health care payment \$	
RECIPIENT'S name  <b>VIP Office</b>		7 Nonemployee compensation \$	8 Substitute payments in lieu of dividends or interest \$	
Street address (including apt. no.)  <b>P.O. Box 128</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$	10 Crop insurance proceeds \$	
City, state, and ZIP code <b>Baltimore, MD 21001</b>		11	12	
Account number (optional) <b>333-333-333-333</b>		13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
15		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$
		\$		\$

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		\$	2005	
		2 Royalties	Form 1099-MISC	
PAYER'S Federal identification number  <b>52-2165630</b>		3 Other Income	4 Federal Income tax withheld	<b>Copy B For Receipt</b>
		\$ <b>\$80.00</b>	\$	
RECIPIENT'S identification number  <b>593-24-1555</b>	5 Fishing boat proceeds		6 Medical and health care payment	<b>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a tax 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.</b>
RECIPIENT'S name  <b>VIP Office</b>		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
Street address (including apt. no.) <b>P.O. Box 128</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds	
City, state, and ZIP code <b>Baltimore, MD 21001</b>		11	12	
Account number (optional)  <b>333-333-333-333</b>		13 Excess golden parachute payment	14 Gross proceeds paid to an attorney	
15	16 State tax withheld		17 State/Payer's state no.	18 State income
	\$			\$
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Account number (optional) <b>333-333-333-333</b>	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payment \$	14 Gross proceeds paid to an attorney \$	
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