REISSUED	a Employee's soci	•			Safe	, Accurate,	20.0	HIO	Visit the	IRS Website	
STATEMENT	5	43-48-5635	OMB N	o. 1545-00	008 FAS	Γ! Use	U	≁file >	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld			
99-964570	כ				84327.84			16508.67			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Gutierrez-Evans Inc				91184.6			6975.62				
87476 Tara Centers Apt. 150				5 Medicare wages and tips			6 Medicare tax withheld				
East Jordanfurt WY 90835-7728				69177.78				2006.16			
East Jordaniurt Wi 90835-7728				7 Social security tips			8 Allocated tips				
				91184.6			69177.78				
d Control number				9 Advance EIC payment 10 Depen				dent care benefits			
7505659									173		
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12			
Christopher Jones				274				G 5652			
				13 Statu empl	tory Retiren	nent Third-party sick pay	'	12b	ı		
056 Lutz Crossing				X					501		
Hannaberg RI 73913-6941				14 Other (see enclosed Notice to Employee)			yee)	12c	1		
							517				
			12d								
									754		
f Employee's address and ZIF	code										
15 State Employer's state I) number	16 State wages, tips, etc.	17 State income tax		18 Local wage:	s, tips, etc.	19 I	_ocal income tax	(20 Locality name	
MT 377-	15-879	40233.19	2922.31		71729.54		97	9726.81		Thomas Grove	
SD 287-	94-700	44419.53	2801.35	70440.9		13	13969.99		Roberts Crossroad		

Wage and Tax Statement 5070

Department of the Treasury--Internal Revenue Service

Form W-2 Statement
Copy B--To Be Filed with Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

Cut here. Keep lower portion for your records.

	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you are rec								ice. If you are required		
_	TATEMENT	• •	43-48-5635	OMB N	OMP No. 1545 0009 to file a tax return, a negligence penalty or other sanction may be imposed on you if						
	over identification number		10 10 0000		this income is taxable and you fail to report it. 1 Wages, tips, other compensation 2 Federal income tax withheld						
99-9645700				84327.84			16508.67				
c Emplo	oyer's name, address, and 2	ZIP code			3 Social security wages			4 Social security tax withheld			
Gutierrez-Evans Inc				91184.6			6975.62				
87476 Tara Centers Apt. 150 East Jordanfurt WY 90835-7728				5 Medicare wages and tips			6 Medicare tax withheld				
				69177.78			2006.16				
				7 Social security tips			8 Allocated tips				
					91184.6			69177.78			
d Control number				9 Advance EIC payment			10 Dependent care benefits				
7505659							173				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12				
Christopher Jones				274			G 5652				
				13 Sta			12b	i i			
056 Lutz Crossing				em X	ployee plan sick pa	У		501			
Hannaberg RI 73913-6941				14 Other (see enclosed Notice to Employee)			12c				
							517				
								12d			
							754				
	oyee's address and ZIP cod										
15 State	, .,		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income ta	x	20 Locality name	
MT	377-15	-879	40233.19	2922.31		71729.54	97	726.81		Thomas Grove	
SD	287-94	-700	44419.53	2801.35		70440.9	13	3969.99		Roberts Crossroad	

Wage and Tax

Form W-2 **Statement**Copy C For EMPLOYEE'S RECORDS.
(See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

