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|---------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------|--|
| REISSUED STATEMENT | | a Employee's social security number 262-23-4480 | | Safe, Accurate, FAST! Use  | | Visit the IRS Website at www.irs.gov/efile . | |
| b Employer identification number 20-5673901 | | | | 1 Wages, tips, other compensation 216081.24 | | 2 Federal income tax withheld 30800.22 | |
| c Employer's name, address, and ZIP code Cooke-Williams and Sons 4594 Jason River Apt. 657 West Kennethside RI 35006-6494 | | | | 3 Social security wages 155244.8 | | 4 Social security tax withheld 11876.23 | |
| | | | | 5 Medicare wages and tips 177420.06 | | 6 Medicare tax withheld 5145.18 | |
| | | | | 7 Social security tips 155244.8 | | 8 Allocated tips 177420.06 | |
| d Control number 6425663 | | | | 9 Advance EIC payment | | 10 Dependent care benefits 249 | |
| e Employee's first name and initial Last name Mercedes Cook 446 Burke Grove Haleytown AL 39315-2760 | | | | 11 Nonqualified plans 143 | | 12a See instructions for box 12 D 6062 | |
| | | | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b G 431 | |
| | | | | 14 Other (see enclosed Notice to Employee) | | 12c E 755 | |
| | | | | | | 12d 544 | |
| f Employee's address and ZIP code | | | | 15 State Employer's state ID number | | 16 State wages, tips, etc. | |
| AK 598-95-325 | | 17 State income tax 14615.67 | | 18 Local wages, tips, etc. 202230.51 | | 19 Local income tax 29975.16 | |
| ND 682-08-664 | | 101963.8 | | 10303.24 | | 277096.15 | |
| | | 36573.94 | | | | David Islands | |

**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

Form W-2
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 STATEMENT | | a Employee's social security number 262-23-4480 | | OMB No. 1545-0008 | | This information 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 you fail to report it. | |
| b Employer identification number 20-5673901 | | | | 1 Wages, tips, other compensation 216081.24 | | 2 Federal income tax withheld 30800.22 | |
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**Wage and Tax
Statement**

2010

Department of the Treasury--Internal Revenue Service

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

Safe, accurate,
FAST! Use

