REISSUED a Employ STATEMENT	ee's social security number 262-52-6568	OMB No	. 1545-000	Safe, Accurate, PAST! Use	e~f	ile)		IRS Website		
b Employer identification number 05-2522322				ages, tips, other compensation 45878.81	2	2 Federal income tax withheld 9757.95				
c Employer's name, address, and ZIP code				ocial security wages 46963.54	4	4 Social security tax withheld 3592.71				
Reese, Stewart and Moore Group 21468 Greene Lodge				edicare wages and tips 53924.44	6					
Michelleberg ME 77677-9615				ocial security tips 46963.54	8					
d Control number 4216002				9 Advance EIC payment			10 Dependent care benefits 149			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Christopher Norton 9728 Hardy Fall Port Ronald OR 53267-3187			13 Statuto	119 ory Retirement Third-party	12b	G 8579				
			emplo	yee plan sick pay		P	327			
			14 Other (see enclosed Notice to Employee)			:				
						256				
f Employee's address and ZIP code						Н	329			
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Local i	ncome tax	(20 Locality name		
TX 924-98-573	24928.03	1016.88	47174.46 5904.		.17	17 Jennifer				
RI 591-29-362	20652.5	912.94		46915.31	6433	.79		Miles Islands		

Wage and Tax

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.

R	EISSUED	a Employee's socia	l security number		This information is being furnished to the Internal Revenue Service. If you are required							
ST	ATEMENT	26	52-52-6568	OMB N	OMB No. 1545-0008 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 Employ	b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld			
05-2522322					45878.81				9757.95			
c Employer's name, address, and ZIP code				3 Social security wages				4 Social security tax withheld				
Reese, Stewart and Moore Group				46963.54				3592.71				
21468 Greene Lodge				5 Medicare wages and tips 53924.44				6 Medicare tax withheld 1563.81				
												Michelleberg ME 77677-9615
				46963.54				53924.44				
d Control number					9 Advance EIC payment				10 Dependent care benefits			
4216002								149				
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12					
Christopher Norton				119 13 Statutory Retirement Third-party				G 8579				
				13 Statutory Retirement Third-party employee plan sick pay				12b				
9728 Hardy Fall							P	327				
Port Ronald OR 53267-3187			14 Other (see enclosed Notice to Employee)				12c					
TOTO ROMATA ON SSECT SECT								256				
								12d				
								Н	н 329			
	ee's address and ZIP coo		T -								1	
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wage			ocal income	tax	20 Locality name	
TX	924-98	5-573	24928.03	1016.88		47174.	46	590)4.17		Jennifer Hollow	
RI	591-29	-362	20652.5	912.94		46915.	31	643	33.79		Miles Islands	

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

