REISSUED	a Employee's socia	I security number		Safe, Accurate,				Visit the IRS Website			
STATEMENT	38	2-05-6965	OM	ИВ No. 1545-00	08 FAST! U	se	Prfile	at www.irs.gov/efile.			
b Employer identification number	•			1 V	1 Wages, tips, other compensation			2 Federal income tax withheld			
99-6958995					50451.98			15662.24			
c Employer's name, address, and	ZIP code			3 8	3 Social security wages			4 Social security tax withheld			
Perez-Jimenez Ltd					37208.45			2846.45			
3005 Victoria Harbors				5 N				6 Medicare tax withheld			
Alisonton AL 62907-3812				7 8	52457.18			1521.26			
Alisonton AL 62907-3812					ocial security tips		8 Allocate	8 Allocated tips			
					37208.45			52457.18			
d Control number					9 Advance EIC payment			10 Dependent care benefits			
6452697								264			
e Employee's first name and initial Last name				11 N	11 Nonqualified plans			12a See instructions for box 12			
James Davila					100			6711			
					13 Statutory Retirement Third-party employee plan sick pay			12b			
17793 Meyer Ports					X X Sick pay			н 244			
North Michaelmouth NE 42637-								1			
NOI CHI MICHAEIMOUCH NE 42037								334			
								12d			
							G	237			
f Employee's address and ZIP co	de										
15 State Employer's state ID n	umber	16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips,	etc. 1	9 Local income tax	20 Locality name			
NE 005-5	4-068	23900.37	2850.48		56405.94 6		394.38	Christine Knolls			
TN 977-6	4-948	24655.42	2729.58		52930.65	6	059.26	Carrillo Ways			

Wage and Tax

Form W-2 Statement

5010

Department of the Treasury--Internal Revenue Service

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.

RE	ISSUED	a Employee's socia	Il security number		This information is being furnished to the Internal Revenue Service. If you are required							
STA	ATEMENT	38	32-05-6965	ON	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 Employer identification number					1 V	1 Wages, tips, other compensation			2 Federal income tax withheld			
99-6958995						50451.98			15662.24			
c Employer's name, address, and ZIP code					3 8	3 Social security wages			4 Social security tax withheld			
Perez-Jimenez Ltd						37208.45			2846.45			
3005 Victoria Harbors					5 N	5 Medicare wages and tips			6 Medicare tax withheld			
						52457.18				1521.26		
A	Alisonton AL 62907-3812					7 Social security tips			8 Allocated tips			
						37208.45			52457.18			
d Control number					9 A	9 Advance EIC payment			10 Dependent care benefits			
6452697									264			
e Employee's first name and initial Last name					11 N	11 Nonqualified plans			12a See instructions for box 12			
James Davila					100			6711				
				13 Statu	13 Statutory Retirement Third-party				12b			
17793 Meyer Ports					emple	pyee plan	sick pay		н	244		
17795 Meyel Polts								11 12c	244			
North Michaelmouth NE 42637-					14 0	ther (see enclosed Noti	ce to Employ	ree) 1	120	I		
									334			
								1	12d	i		
									G	G 237		
								<u> </u>				
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income	tax	18 Local wages, tips,	etc.	19 Loc	cal income tax		20 Locality name	
NE	005-54	1-068	23900.37	2850.48		56405.94 6		639	6394.38		Christine Knolls	
TN	977-64	1-948	24655.42	2729.58		52930.65 60		605	059.26		Carrillo Ways	

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

