REISSUED	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS We						IRS Website	
STATEMENT	67	76-25-3920	OMB N	o. 1545-00	08 FAST!	Use	<b>G</b> 11	le)	at www.i	rs.gov/efile.	
b Employer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld			
34-467860	6			188095.33				46228.0			
c Employer's name, address,	and ZIP code			3 Social security wages				4 Social security tax withheld			
Harmon-Kerr PLC				191740.03				14668.11			
25449 Alvarado Bypass Suite 025				5 Medicare wages and tips				6 Medicare tax withheld			
East Wayneside GA 07685-1336				236305.36				6852.86			
East Wayneside GA 07005-1550				7 Social security tips				8 Allocated tips			
				191740.03				236305.36			
d Control number				9 Advance EIC payment				10 Dependent care benefits			
4314147								117			
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12			
Lawrence Simpson				263				2960			
				13 Statutory Retirement Third-party employee plan sick pay				12b			
52695 Samuel Route Apt. 781								E 390			
East Jesse MA 77471-2052				14 Other (see enclosed Notice to Employee)				12c			
							P	731			
						12d	12d				
									725		
f Employee's address and ZIF		T	T.= -		T					1	
15 State Employer's state		16 State wages, tips, etc.	17 State income tax		18 Local wages, tip		19 Local in			20 Locality name	
CT 304-	28-393	94491.27	4950.94		180943.5	4	23967	.85		Johnson Via	
ME 060-	75-202	89733.46	8012.73		190631.4	7	28578	. 4		Randall Street	

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.

F	REISSUED	a Employee's socia	•		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							
	TATEMENT	6	76-25-3920	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
<b>b</b> Emplo	<b>b</b> Employer identification number				1 Wages, tips, other compensation				Federal income tax withheld			
34-4678606					188095.33				46228.0			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld			
Harmon-Kerr PLC					191740.03				14668.11			
25449 Alvarado Bypass Suite 025					5 Medicare wages and tips				6 Medicare tax withheld			
East Wayneside GA 07685-1336					236305.36				6852.86			
East waynestde GA 0/005-1330				7 Social security tips				8 Allocated tips				
				191740.03				236305.36				
d Contro	d Control number				9 Advance EIC payment				10 Dependent care benefits			
	4314147								117			
e Emplo	e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12			
	Lawrence Simpson 52695 Samuel Route Apt. 781				263 13 Statutory Retirement Third-party			,	2960			
					employee plan sick pay					E	E 390	
	East Jesse MA 77471-2052					14 Other (see enclosed Notice to Employee)			12c			
										P	731	
								-	12d			
								725				
f Employee's address and ZIP code  15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax					18 Local wages,	tine etc	10 1	ocal inc	ome tax	,	20 Locality name	
			9			10 2000 100 900, 1100, 1100		-				
CT	304-28	5-393	94491.27	4950.94	180943.54 2		23	23967.85			Johnson Via	
ME	060-75	5-202	89733.46	8012.73		190631.	47	28	578	. 4		Randall Street

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

