REISSUED a Employee's social security number	Safe, Accurate, Visit the IRS Website					
STATEMENT 221-94-2332	OMB No. 1545-00	008 FAST! Use	rse file a	at www.irs.gov/efile.		
b Employer identification number	1 \	Vages, tips, other compensation	2 Federal in	ncome tax withheld		
01-1026533		54702.04	8270.	8270.22		
c Employer's name, address, and ZIP code	3 5	Social security wages	4 Social se	4 Social security tax withheld		
Bell-Martin PLC		47953.93	3668.	3668.48		
96442 Erickson Causeway	5 1	Medicare wages and tips		• modicare tax mamoid		
_		40410.39		1171.9		
West Georgeport AK 44707-4363	7 5	Social security tips		8 Allocated tips		
		47953.93		40410.39		
d Control number	9 /	Advance EIC payment	10 Depende	10 Dependent care benefits		
6963251				172		
e Employee's first name and initial Last name		Nonqualified plans	12a See insti	12a See instructions for box 12		
		228	:	1814		
Kevin Adams	13 Statu		y 12b			
894 Wendy Cliffs Suite 215	empi	oyee plan sick pay	н :	284		
Dawnberg CA 25982-1579	14 (Other (see enclosed Notice to Emplo	oyee) 12c			
			н	943		
			12d	12d		
			G	421		
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, tips, etc.	19 Local income tax	20 Locality name		
MA 717-77-944 28118.49 1962	2.91	43449.07	7308.43	08.43 Patricia Plaz		
OK 176-21-887 28674.39 2072	2.18	57931.44	8751.36	Walker Bypass		

Wage and Tax

Form W-2 Statement

5070

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.

REI	ISSUED		cial security number		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						
STAT	TEMENT	2	21-94-2332	OMB No	OMB No. 1545-0008 this income is taxable and you fail to report it.						
b Employer identification number			1 Wages, tips, other compensation			Federal income tax withheld					
01-1026533				54702.04			8270.22				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Bell-Martin PLC				47953.93			3668.48				
96442 Erickson Causeway				5 Medicare wages and tips 40410.39			6 Medicare tax withheld 1171.9				
West Georgeport AK 44707-4363											
			7 Social security tips			8 Allocated tips					
			47953.93			40410.39					
d Control nur	d Control number			9 Advance EIC payment			10 Dependent care benefits				
6963251							172				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Kevin Adams			228			1814					
			13 Stat	utory Retirement Third-party ployee plan sick pay		12b	i				
894 Wendy Cliffs Suite 215			н 284								
Dawnberg CA 25982-1579			14	Other (see enclosed Notice to Employ	ree)	12c	l				
, ,					H	943					
								12d			
								G	421		
	's address and ZIP co			1						1	
	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income ta	<	20 Locality name	
MA	717-7	7-944	28118.49	1962.91		43449.07	73	08.43		Patricia Plaza	
OK	176-2	L-887	28674.39	2072.18		57931.44	87	51.36		Walker Bypass	

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

