F	REISSUED	a Employee's socia	ll security number				Safe, Accurate	100	A HIO	Visit the	IRS Website			
S	TATEMENT	55	52-84-8711	OMB N	lo. 1545-	8000	FAST! Use		√file	at www.	irs.gov/efile.			
b Employer identification number							, other compensatio	n	2 Federal income tax withheld					
06-7644159							233083.55				55225.64			
c Employer's name, address, and ZIP code							rity wages		4 Social security tax withheld					
	Church-Jaco	269027.4				20580.6								
89758 Andrea Common Suite 574 South Jamie ND 44085-5458							ages and tips		6 Medicare tax withheld					
							69.0		7446.3					
						Social secu			8 Allocated tips					
							27.4		256769.0					
d Control number						9 Advance EIC payment 10 Depende					enefits			
2639986									189					
e Employee's first name and initial Last name					11 Nonqualified plans				12a See instructions for box 12					
					182				3978					
	Felicia Summers					atutory pployee	Retirement Third plan sick	12b						
	9020 Walke	_	(X X		G	892							
	West Lesli	14 Other (see enclosed Notice to Employee)				12c								
West Leslietown TX 81506-5010										420				
						!				12d				
										254				
						1				354				
f Emplo	eyee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local	wages, tips, etc.	19	Local income t	ax	20 Locality name			
ID	724-77		106962.48	10219.89		3, 1.,			24395.19		1			
עד	124-11	- 333	100902.40	10219.09		290901.75		. 		Brittany Burgs				
MA	004-19	-474	123748.05	8745.31		227068.03		3509.5	Griffin Haven					

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.

RE	EISSUED	a Employee's soc	ial security number			This information is being furnished to the Internal Revenue Service. If you are required																						
STA	ATEMENT	5	52-84-871	1	OMB No	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 Wages, tips, other compensation					2 Federal income tax withheld																	
06-7644159							233083.55				55225.64																	
c Employer's name, address, and ZIP code							3 Social security wages				4 Social security tax withheld																	
Church-Jacobs Ltd							269027.4				20580.6																	
89758 Andrea Common Suite 574 South Jamie ND 44085-5458						5 Medicare wages and tips 256769.0 7 Social security tips				6 Medicare tax withheld 7446.3 8 Allocated tips																		
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														d Control number							9 Advance EIC payment				10 Dependent care benefits			
2	2639986												189															
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12																		
Felicia Summers					182 13 Statutory Retirement Third-party				3978																			
9020 Walker Meadow Suite 969 West Leslietown TX 81506-5010						employee plan sick pay X Other (see enclosed Notice to Employee)					G 892																	
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													f Employee's address and ZIP code						1.0			1.0	<u></u>			Lan I III		
15 State	Employer's state ID n		16 State wages, ti		State income tax					9 Local income tax			20 Locality name															
ID	724-77	/-933 	106962.4	8 1	0219.89		295951.75 2		24	24395.19			Brittany Burgs															
MA	004-19	9-474	123748.0	5 8	745.31		227068.03 3		33	33509.5			Griffin Haven															

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

