


<b>REISSUED STATEMENT</b>		a Employee's social security number <b>738-97-6062</b>		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number <b>65-4190094</b>				1 Wages, tips, other compensation <b>233973.58</b>		2 Federal income tax withheld <b>38524.8</b>	
c Employer's name, address, and ZIP code <b>Hamilton-Thompson and Sons</b> <b>473 Wade Bypass</b> <b>Port Johnchester NV 07383-2943</b>				3 Social security wages <b>212281.34</b>		4 Social security tax withheld <b>16239.52</b>	
				5 Medicare wages and tips <b>237880.44</b>		6 Medicare tax withheld <b>6898.53</b>	
				7 Social security tips <b>212281.34</b>		8 Allocated tips <b>237880.44</b>	
d Control number <b>3568875</b>				9 Advance EIC payment		10 Dependent care benefits <b>188</b>	
e Employee's first name and initial Last name  <b>Carla Doyle</b> <b>2965 Mendoza Ridge</b> <b>West Michaelbury SD 21860-0</b>				11 Nonqualified plans <b>199</b>		12a See instructions for box 12 <b>E 2250</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b <b>806</b>	
				14 Other (see enclosed Notice to Employee)		12c <b>831</b>	
						12d <b>G 413</b>	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
<b>KY</b>		<b>796-47-376</b>		<b>124739.21</b>		<b>11033.37</b>	
<b>WI</b>		<b>318-22-050</b>		<b>117156.92</b>		<b>10304.25</b>	
				<b>275829.46</b>		<b>36628.07</b>	
						<b>Meredith Burgs</b>	
						<b>Marcus Glens</b>	

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
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.

<b>REISSUED STATEMENT</b>		a Employee's social security number <b>738-97-6062</b>		OMB No. 1545-0008		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 this income is taxable and you fail to report it.	
b Employer identification number <b>65-4190094</b>				1 Wages, tips, other compensation <b>233973.58</b>		2 Federal income tax withheld <b>38524.8</b>	
c Employer's name, address, and ZIP code <b>Hamilton-Thompson and Sons</b> <b>473 Wade Bypass</b> <b>Port Johnchester NV 07383-2943</b>				3 Social security wages <b>212281.34</b>		4 Social security tax withheld <b>16239.52</b>	
				5 Medicare wages and tips <b>237880.44</b>		6 Medicare tax withheld <b>6898.53</b>	
				7 Social security tips <b>212281.34</b>		8 Allocated tips <b>237880.44</b>	
d Control number <b>3568875</b>				9 Advance EIC payment		10 Dependent care benefits <b>188</b>	
e Employee's first name and initial Last name  <b>Carla Doyle</b> <b>2965 Mendoza Ridge</b> <b>West Michaelbury SD 21860-0</b>				11 Nonqualified plans <b>199</b>		12a See instructions for box 12 <b>E 2250</b>	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b <b>806</b>	
				14 Other (see enclosed Notice to Employee)		12c <b>831</b>	
						12d <b>G 413</b>	
f Employee's address and ZIP code				15 State Employer's state ID number		16 State wages, tips, etc.	
<b>KY</b>		<b>796-47-376</b>		<b>124739.21</b>		<b>11033.37</b>	
<b>WI</b>		<b>318-22-050</b>		<b>117156.92</b>		<b>10304.25</b>	
				<b>275829.46</b>		<b>36628.07</b>	
						<b>Meredith Burgs</b>	
						<b>Marcus Glens</b>	

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy C For EMPLOYEE'S RECORDS.  
(See enclosed Notice to Employee.)

Safe, accurate,  
FAST! Use

