REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website								
STATEMENT	892-29-2842	OMB N	o. 1545-00	008 FAST! Use	G ~ I	II E	at www.ir	s.gov/efile.			
b Employer identification number				1 Wages, tips, other compensation			2 Federal income tax withheld				
52-4625406				152936.84			52191.46				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Lara-Perry Group				126263.32			9659.14				
99893 Burnett Bridge				5 Medicare wages and tips			6 Medicare tax withheld				
			130219.25			3776.36					
Amyborough LA 86911-2884				7 Social security tips			8 Allocated tips				
				126263.32			130219.25				
d Control number				9 Advance EIC payment 10 Dependent care benefits				nefits			
3301663								227			
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Kelly Jackson			278			5752					
			13 Statutory Retirement Third-party			12b					
29407 Bowers Valley			employee plan sick pay			G 436					
-				Other (see enclosed Notice to Employ	ee) 12c		1				
Mosleyland NM 12740-5321						_	937				
					12d	G	931				
					120		1				
						D	925				
f Employee's address and ZIP code				<u></u>							
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Local i		(20 Locality name			
NC 055-03-53	39 77477.44	3714.79		181483.0	17722	2.95		Sanchez Pike			
TN 682-66-59	79949.91	3121.86		116106.85	25745	5.64		Contreras Canyon			

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.

R	REISSUED	a Employee's soc	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
SI	TATEMENT	8	92-29-2842	OMB N	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				Wages, tips, other compensation			2	2 Federal income tax withheld				
52-4625406					152936.84			52191.46				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Lara-Perry Group				126263.32				9659.14				
99893 Burnett Bridge				5 Medicare wages and tips			6					
Amyborough LA 86911-2884				130219.25				3776.36				
				7 Social security tips			8	8 Allocated tips				
					126263.32			130219.25				
d Control number					9 Advance EIC payment			10 Dependent care benefits				
3301663					2				227	227		
e Employee's first name and initial Last name			11 Nonqualified plans			12a	12a See instructions for box 12					
Kelly Jackson				278				5752				
Reily backson			13 Statutory Retirement Third-party employee plan sick pay			12b		ı				
29407 Bowers Valley				X				G	436			
Mosleyland NM 12740-5321				14 (Other (see enclosed Notice to	Employee	e) 12c		ı			
								G	937			
						12d						
								D 925				
	yee's address and ZIP co										,	
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	'	9 Local i		(20 Locality n	ıame
NC	055-03	3-539	77477.44	3714.79		181483.0	1	L7722	2.95		Sanchez	Pike
TN	682-60	6-598	79949.91	3121.86		116106.85	2	25745	5.64		Contreras	Canyon

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

