REISSUED a Employee's social security number		Safe, Accura	te,		Visit the IRS Website		
STATEMENT 851-04-7748	OMB No. 1545-00	008 FAST! Use			at www.irs.gov/efile.		
<b>b</b> Employer identification number	1 V	Vages, tips, other compensa	ation	2 Federal i	income tax withheld		
15-8931213		41829.57			12731.22		
c Employer's name, address, and ZIP code	3 8	3 Social security wages			4 Social security tax withheld		
Chandler, Moore and Grant Inc		46100.33			3526.68		
23951 Rachel Stravenue	5 N	Medicare wages and tips		6 Medicare tax withheld			
Melindaport MT 62703-9877		41865.2		1214.09			
Melindapoic Mi 02/03/30//	7 8	7 Social security tips			8 Allocated tips		
		46100.33		1	41865.2		
d Control number	9 A	9 Advance EIC payment			10 Dependent care benefits		
9002348					228		
e Employee's first name and initial Last name	11 N	lonqualified plans		12a See inst	ructions for box 12		
** 1 ** 1		231			E 5787		
Kayla Morales	13 Statu		hird-party	12b			
21034 Madison Land Suite 882	empi	employee plan sick pay			806		
West Daniellefurt ID 93941-85	14 (	Other (see enclosed Notice t	o Employee)	12c			
					527		
				12d			
					359		
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		
AL 588-65-995 19119.09 1794	. 32	51190.34	54	19.61	Samuel Track		
000 06 507	1.0	20102 45		.47 0			
SC 200-26-507 22055.13 2278	.16	38193.45	79	47.0	Simmons Lock		

Wage and Tax Statement

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.

F	REISSUED	a Employee's soci	al 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						
S	TATEMENT	8.	51-04-7748	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			1 Wages, tips, other compensation				Federal income tax withheld				
15-8931213				41829.57				12731.22			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld		
Chandler, Moore and Grant Inc				46100.33				3526.68			
23951 Rachel Stravenue				5 Medicare wages and tips 41865.2				6 Medicare tax withheld 1214.09			
Melindaport MT 62703-9877											
			7 Social security tips				8 Allocated tips				
				46100.33				41865.2			
d Control number			9 Advance EIC payment				10 Dependent care benefits				
	9002348									228	
e Employee's first name and initial Last name			11 Nonqualified plans				12a See instructions for box 12				
Kayla Morales			231  13 Statutory Retirement Third-party employee plan sick pay				E 5787				
21034 Madison Land Suite 882			Simple Control of the					806			
West Daniellefurt ID 93941-85			14	Other (see enclosed Notice	to Employ	ee)	12c				
West Daniellelait 1D 93941 03						527					
									12d	1	
									359		
f Emplo 15 State	oyee's address and ZIP con Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc	,	19 1	ocal income ta	v	20 Locality name
AL	588-65		19119.09	1794.32		51190.34			19.61	•	,
АП	200-03	J-933	19119.09	1134.32		31130.34		J4.	T 9 . U T		Samuel Track
sc	200-26	6-507	22055.13	2278.16		38193.45		794	7947.0		Simmons Lock

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

