REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website					
STATEMENT 828-94-4458	OMB No. 1545-0	008 FAST! Use	at www.irs.gov/efile.				
b Employer identification number	1	Wages, tips, other compensation	2 Federal income tax withheld				
01-8574537		69159.49	10293.42				
c Employer's name, address, and ZIP code	3	Social security wages	4 Social security tax withheld				
Wood, Lee and Spencer Inc		83736.53	6405.84				
3794 Veronica Points Apt. 163	5	Medicare wages and tips	6 Medicare tax withheld 1846.01 8 Allocated tips				
South Daniel LA 53794-7733	7	63655.67 Social security tips					
30000 20000 20000 20000	,	83736.53	63655.67				
d Control number	9	Advance EIC payment	10 Dependent care benefits				
7290716		254					
e Employee's first name and initial Last name	11	Nonqualified plans	12a See instructions for box 12				
Tananh Mantinas		165	P 3845				
Joseph Martinez		utory Retirement Third-party loyee plan sick pay	12b				
558 Mcconnell Loop Suite 571		julian Sick Pay	G 498				
Erinville ID 20207-7340	14	Other (see enclosed Notice to Employ	yee) 12c				
			н 122				
			12d				
			D 820				
f Employee's address and ZIP code			-				
15 State Employer's state ID number 16 State wages, tips, etc. 17 St	ate income tax	18 Local wages, tips, etc.	19 Local income tax 20 Locality name				
RI 394-63-916 34494.62 313	32.14	73721.35	7185.96 Brandon Shore				
HI 246-36-784 34511.87 453	33.15	72607.8	11569.48 Underwood Isl				

Wage and Tax Statement

5010

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.

F	REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required								
S	TATEMENT	82	28-94-4458	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 Emplo	yer identification number				Wages, tips, other compensation			2 Federal income tax withheld					
01-8574537			69159.49			10293.42							
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld							
Wood, Lee and Spencer Inc			83736.53			6405.84							
3794 Veronica Points Apt. 163 South Daniel LA 53794-7733			5 Medicare wages and tips 63655.67			6 Medicare tax withheld 1846.01							
									South Daniel LA 55/94-7/55				7 Social security tips
						83736.53			6365	5.67			
d Contro	ol number				9 /	Advance EIC payment		10 Depen	dent care b	enefits			
	7290716								254				
e Employee's first name and initial Last name		11 Nonqualified plans			12a See instructions for box 12								
Joseph Martinez			165 13 Statutory Retirement Third-party			P 3845							
			13 Statutory Retirement Third-party employee plan sick pay			12b	1						
558 Mcconnell Loop Suite 571						G 498							
Erinville ID 20207-7340			14 Other (see enclosed Notice to Employee)			12c	1						
						Н	122						
							Ī	12d	i				
								D	820				
	yee's address and ZIP cod												
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax			20 Locality name						
RI	394-63	3-916	34494.62	3132.14		73721.35	71	85.96		Brandon Shores			
HI	246-36	5-784	34511.87	4533.15	72607.8 11569.			569.48		Underwood Isle			

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

