	REISSUED a Employee's social security number				Safe, Accurate,				5 D _1	Visit the IRS Website			
S1	TATEMENT	02	3-30-6402	OMB N	o. 1545-	8000	FAST! Us	e	<u> </u>	ШБ	at www.i	rs.gov/efile).
b Employ	yer identification number				1 Wages, tips, other compensation					2 Federa	al income ta	x withheld	
	45-3006055				113136.34					25282.98			
c Employ	yer's name, address, and ZIF	P code		•	3 Social security wages					4 Social security tax withheld			
Watkins PLC and Sons					133626.8					10222.45			
65777 Newman Turnpike Apt. 260					5 Medicare wages and tips					6 Medicare tax withheld			
North Susanfort IN 17714-4259					88732.52					2573.24			
	NOI CII SUSAIII	OIC IN	17714 4233		7 Social security tips					8 Allocated tips			
						133626.8				88732.52			
d Control number					9	Advance E	IC payment			10 Deper	dent care b	enefits	
	5169204										273		
e Employee's first name and initial Last name				11 Nonqualified plans					12a See instructions for box 12				
				134					1756				
Whitney Serrano					13 Statutory Retirement Third-party					12b			
947 Miller Drive Suite 405					employee plan sick pay					G 436			
Mooreburgh NH 38193-9542					14	Other (see	enclosed Not	ce to Employ	ee)	12c			
Mooreburgh Nn 50195 9542											245		
										12d			
											523		
											523		
f Employ 15 State	yee's address and ZIP code Employer's state ID num		16 State wages, tips, etc.	17 State income tax		18 Loc	al wages, tips,	etc	10 10	cal income ta	v	20 Locality	/ name
			= ' ' '			3,,,,,,			.2683.02		-		
AZ	954-64-	-/12	53282.37	4048.43		108	503.59		126	003.02		Cody	TOCK
IL	762-07-	-219	51855.91	4216.63		145	328.0		187	47.61		Calhour	Knoll
				L								1	

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.

F	REISSUED	a Employee's soc	•		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	0	23-30-6402	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 Emplo	b Employer identification number					Wages, tips, other compensation	2 Federal income tax withheld					
45-3006055						113136.34	25282.98					
c Emplo	oyer's name, address, and	3	Social security wages	4 Social security tax withheld								
Watkins PLC and Sons						133626.8	10222.45					
65777 Newman Turnpike Apt. 260					5	Medicare wages and tips	6 Medicare tax withheld 2573.24 8 Allocated tips					
	North Susanfort IN 17714-4259					88732.52						
						Social security tips						
						133626.8	88732.52					
d Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
	5169204								273			
e Emplo	e Employee's first name and initial Last name					Nonqualified plans	12a See instructions for box 12					
	Whitney Serrano				13 Stati	134 itory Retirement Third-party oyee plan sick pay	1756					
	947 Miller Drive Suite 405						G 436					
Mooreburgh NH 38193-9542					14 (Other (see enclosed Notice to Employ	12c					
							245					
								12d	ī			
									523			
	oyee's address and ZIP co		Tra a	Language and the second		Train	1.0					
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		Local income tax		20 Localit	•	
AZ	954-64	1-712	53282.37	4048.43		108803.59	12	683.02		Cody	Lock	
IL	762-0	7-219	51855.91	4216.63		145328.0	18	747.61		Calhou	n Knoll	

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

