STATEMENT 682-92-9618 OMB No. 1545-0008				
STATEMENT 682-92-9618 OMB No. 1545-0008	FAST! Use	at www.irs.gov/efile.		
b Employer identification number 1 Was	ages, tips, other compensation	2 Federal income tax withheld		
39-6681434	42087.27	14352.52		
c Employer's name, address, and ZIP code 3 Soc	cial security wages	4 Social security tax withheld		
Walsh, Jackson and Dean and Sons	34856.03	2666.49		
34179 Chad Ridges	dicare wages and tips	6 Medicare tax withheld		
Wathless NO 52200 5015	35195.22	1020.66		
Kathleentown MO 53329-5015	cial security tips	8 Allocated tips		
	34856.03	35195.22		
	vance EIC payment	10 Dependent care benefits		
3691947		292		
e Employee's first name and initial Last name 11 Nor	nqualified plans	12a See instructions for box 12		
	290	8508		
Robin Escobar 13 Statutory		12b		
3166 Joseph Ramp Apt. 482		E 968		
Port Margaretland SD 82608-7 14 Oth	ner (see enclosed Notice to Employe	ee) 12c		
		330		
		12d		
		395		
f Employee's address and ZIP code				
1.,	18 Local wages, tips, etc.	19 Local income tax 20 Locality name		
OK 351-45-357 19621.85 1126.05 3	36386.91	6101.66 Salazar Club		
MO 336-11-364 22633.45 1436.34 4	40140.83	5475.03 White Walk		

Wage and Tax

5070

Department of the Treasury--Internal Revenue Service

Statement 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.

R	REISSUED	a Employee's socia	al security number		This information is being furnished to the Internal Revenue Service. If you are required							
ST	TATEMENT	68	32-92-9618	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			2 Federal income tax withheld					
39-6681434				42087.27			14352.52					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Walsh, Jackson and Dean and Sons				34856.03			2666.49					
34179 Chad Ridges Kathleentown MO 53329-5015				5 Medicare wages and tips			6 Medicare tax withheld					
				35195.22			1020.66					
				7 Social security tips			8 Allocated tips					
				34856.03			35195.22					
d Control number				9 Advance EIC payment			10 Dependent care benefits					
3691947								292				
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12					
Robin Escobar 3166 Joseph Ramp Apt. 482 Port Margaretland SD 82608-7				290 13 Statutory Retirement Third-party employee plan sick pay 14 Other (see enclosed Notice to Employee)			8508 E 968					
										330		
										12d	ı	
							395					
f Employee's address and ZIP code												
15 State	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		9 Local income tax		20 Locality name		
OK	351-45	-357	19621.85	1126.05		36386.91		6101.66		Salazar Club		
МО	336-11	-364	22633.45	1436.34		40140.83	5	475.03		White Walk		

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

