REISSUED a Employee's socia	•			Safe, Accurate,	Visit the IRS V		RS Website	
STATEMENT 35	3-07-1134	OMB No	o. 1545-00	008 FAST! Use		*file	at www.ir	s.gov/efile.
b Employer identification number			1 V	Vages, tips, other compensation	1	2 Federal	l income tax	withheld
37-3785285			160841.03			33273.52		
c Employer's name, address, and ZIP code			3 Social security wages			4 Social security tax withheld		
Ward-Hardin Ltd			167141.45			12786.32		
64409 Lopez Burg Benjaminland NV 68600-8535			5 Medicare wages and tips			6 Medicare tax withheld		
			202703.65			5878.41		
			7 Social security tips			8 Allocated tips		
			167141.45			202703.65		
d Control number			9 A	Advance EIC payment		10 Depend	dent care be	nefits
7444332							159	
e Employee's first name and initial Last name	ı		11 N	lonqualified plans		12a See ins	structions f	or box 12
Justin Davis			198			E 3408		
			13 Statutory Retirement Third-party			12b		
110 Betty Fall Apt. 532			employee plan sick pay			E 571		
			14 (Other (see enclosed Notice to Er	nployee)	12c		
Stevenshire AK 48012-7778							122	
						12d		
						120	I	
							950	
f Employee's address and ZIP code				1				
15 State Employer's state ID number	3,.,.,	17 State income tax		18 Local wages, tips, etc.		Local income tax	:	20 Locality name
RI 993-73-915	86080.0	7217.4		138264.01	25	182.26		Laurie Corners
CA 001-79-708	86632.01	9691.87		118049.17	24	1980.15		Brian Knolls

Wage and Tax

Form W-2 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.

DE	EISSUED	a Employee's socia	al security number			This information is being furnish	ned to th	ne Internal Rev	enue Serv	ce. If you are required
	LIGGOLD		53-07-1134	OMP N	OMB No. 1545-0008 OMB No. 1545-0008					
	ATEMENT	33	53-07-1134	OIVID IV	this income is taxable and you fail to report it.					
b Employer identification number			1 Wages, tips, other compensation			2 Federal income tax withheld				
37-3785285				160841.03			33273.52			
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld			
Ward-Hardin Ltd				167141.45			12786.32			
64409 Lopez Burg Benjaminland NV 68600-8535			5 Medicare wages and tips			6 Medicare tax withheld				
			202703.65			5878.41				
			7 Social security tips			8 Allocated tips				
				167141.45			202703.65			
d Control number			9 Advance EIC payment			10 Dependent care benefits				
7444332			!			159				
e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12				
Justin Davis			198			E 3408				
			13 Statutory Retirement Third-party			12b				
110 Betty Fall Apt. 532			emp			E	571			
110 Betty Fall Apt. 552							3/1			
Stevenshire AK 48012-7778			14 Other (see enclosed Notice to Employee)			12c	1			
						122				
							_	12d		
						950				
f Employee's address and ZIP code										
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 Loc	cal income tax		20 Locality name
RI	993-73		86080.0	7217.4		9	251	82.26		Laurie Corners
				 		 				
CA	001-79	-708	86632.01	9691.87		118049.17	249	80.15		Brian Knolls

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

