| REISSUED a Employee's social security number                               | Safe, Accurate, Visit the IRS Website                                   |
|--|---|
| STATEMENT 124-48-7646  | OMB No. 1545-0008 FAST! Use at www.irs.gov/efile.                       |
| <b>b</b> Employer identification number                                    | 1 Wages, tips, other compensation 2 Federal income tax withheld         |
| 82-9313497   | 186846.25 40106.23  |
| c Employer's name, address, and ZIP code                                   | 3 Social security wages 4 Social security tax withheld                  |
| Cherry, Hawkins and Miller PLC   | 143330.56 10964.79  |
| 719 Maldonado Lodge  | 5 Medicare wages and tips 6 Medicare tax withheld                       |
| Johnsonview MS 44561-2539  | 149327.08 4330.49   |
| Johnsonview MS 44561-2539  | 7 Social security tips 8 Allocated tips                                 |
|  | 143330.56 149327.08   |
| d Control number   | 9 Advance EIC payment 10 Dependent care benefits                        |
| 8770283  | 186   |
| e Employee's first name and initial Last name                              | 11 Nonqualified plans 12a See instructions for box 12                   |
|  | 248 E 9837  |
| Melanie Lopez  | 13 Statutory Retirement Third-party 12b                                 |
| 1140 Burton Vista  | employee plan sick pay P 543  |
| New Gregory NJ 51688-7181  | 14 Other (see enclosed Notice to Employee) 12c                          |
|  | P 218   |
|  | 12d   |
|  | E 713   |
| f Employee's address and ZIP code  |   |
| 15 State Employer's state ID number 16 State wages, tips, etc. 17 State in | ome tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name |
| NV 880-74-081 93224.55 4305.   | 49 167523.28 25580.02 stephanie Valleys                                 |
| VT 232-13-346 87065.74 4832.   | 05 215437.31 19548.93 Roberts Freeway                                   |

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.

| R  | EISSUED a Employee's              | social security number     |                        | This information is being furnished to the Internal Revenue Service. If you are required  |                            |                            |                                 |   |                   |  |
|--|-----------------------------------|----------------------------|------------------------|---|----------------------------|----------------------------|---------------------------------|---|-------------------|--|
|  | ATEMENT                           | 124-48-7646                | 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     |   |                   |  |
| 82-9313497                               |                                   |                            | 186846.25              |   |                            | 40106.23                   |                                 |   |                   |  |
| c Employer's name, address, and ZIP code |                                   |                            |                        | 3 Social security wages   |                            |                            | 4 Social security tax withheld  |   |                   |  |
| Cherry, Hawkins and Miller PLC           |                                   |                            |                        | 143330.56   |                            |                            | 10964.79                        |   |                   |  |
| 719 Maldonado Lodge                      |                                   |                            |                        | 5 Medicare wages and tips<br>149327.08  |                            |                            | 6 Medicare tax withheld 4330.49 |   |                   |  |
| Johnsonview MS 44561-2539                |                                   |                            |                        |   |                            |                            |                                 |   |                   |  |
|  |                                   |                            | 7 Social security tips |   |                            | 8 Allocated tips           |                                 |   |                   |  |
|  |                                   |                            |                        | 143330.56   |                            |                            | 149327.08                       |   |                   |  |
| d Control number                         |                                   |                            | 9 Advance EIC payment  |   |                            | 10 Dependent care benefits |                                 |   |                   |  |
| 8770283                                  |                                   |                            |                        |   |                            |                            | 186                             |   |                   |  |
| e Employ                                 | yee's first name and initial Last | name                       |                        | 11 Nonqualified plans 12a See instructions for box  |                            |                            | for box 12                      |   |                   |  |
| Melanie Lopez                            |                                   |                            | 248                    |   | E 9837                     |                            |                                 |   |                   |  |
| Metanie lopez                            |                                   |                            |                        | 13 Statutory Retirement Third-party employee plan sick pay  14 Other (see enclosed Notice to Employee)  |                            |                            | 12b                             | ĺ |                   |  |
| 1140 Burton Vista                        |                                   |                            | P                      |   |                            |                            | P 543                           |   |                   |  |
| New Gregory NJ 51688-7181                |                                   |                            |                        |   |                            |                            | 12c                             |   |                   |  |
| 010g01, 01000 /101                       |                                   |                            | P                      |   |                            |                            | P 218                           |   |                   |  |
|  |                                   |                            |                        |   |                            | Ì                          | 12d                             |   |                   |  |
|  |                                   |                            |                        |   |                            | E                          | E 713                           |   |                   |  |
|  | yee'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. |                            | ocal income tax                 |   | 20 Locality name  |  |
| NV                                       | 880-74-081                        | 93224.55                   | 4305.49                |   | 167523.28                  | 25                         | 580.02                          |   | Stephanie Valleys |  |
| VT                                       | 232-13-346                        | 87065.74                   | 4832.05                |   | 215437.31                  | 19548.93 Roberts Freeway   |                                 |   |                   |  |

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

