REISSUED	a Employee's soci	•			Safe, Accur	ate,			Visit the	IRS Website	
STATEMENT	8:	30-91-9389	OMB N	o. 1545-00	OO8 FAST! Use		544 IL	le)	at www.ii	rs.gov/efile.	
b Employer identification n	mber			1 Wages, tips, other compensation			2	2 Federal income tax withheld			
55-3208133				60832.6			15967.93				
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld				
Russo-Peterson and Sons				76373.17			5	5842.55			
35490 Ramsey Island Suite 244				5 Medicare wages and tips			6				
Kennethshire FL 91590-1035				48194.72				1397.65			
				7 Social security tips				8 Allocated tips			
				76373.17				48194.72			
d Control number				9 Advance EIC payment 10 Dependent care benefits				enefits			
3153662							239				
e Employee's first name and initial Last name				11 Nonqualified plans			12a	12a See instructions for box 12			
Priscilla Hernandez				269				D 3775			
				13 Statutory Retirement Third-party employee plan sick pay			12b		i		
727 Diana Lodge Suite 855				x				D 143			
Rubiobury KY 04269-4962				14 Other (see enclosed Notice to Employee)			e) 12c		ı		
								D	709		
			12d				12d				
								P	183		
f Employee's address and	ZIP code										
15 State Employer's sta	te ID number	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		19 Local income tax			20 Locality name	
TX 72!	-96-977	31383.08	2927.63		66105.24 7		7863.34			Colleen Gateway	
SD 00'	007-03-214 31779.15 2348.39		47629.37		9360.12			Robertson Mews			

Wage and Tax

Form W-2 Statement

5070

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 soci	•		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							
	TATEMENT	8.	30-91-9389	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Emplo	b Employer identification number				1 Wages, tips, other compensation			Federal income tax withheld				
55-3208133					60832.6			15967.93				
c Emplo	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Russo-Peterson and Sons				76373.17			5842.55					
35490 Ramsey Island Suite 244				5 Medicare wages and tips			6 Medicare tax withheld					
	Kennethshire FL 91590-1035				48194.72 7 Social security tips			1397.65 8 Allocated tips				
				76373.17			48194.72					
d Contro	d Control number				9 Advance EIC payment			10 Dependent care benefits				
	3153662								239			
e Emplo	e Employee's first name and initial Last name			11 Nonqualified plans			12a See instructions for box 12					
Priscilla Hernandez				269			D 3775					
	PIISCIIIA HEINANGEZ				13 Statu	tory Retirement Third-party oyee plan sick pay		12b	ı	i		
	727 Diana Lodge Suite 855								D 143			
	Rubiobury KY 04269-4962				14 Other (see enclosed Notice to Employee)			12c		1		
							D	709				
								12d				
								P	183			
f Employee's address and ZIP code												
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.		_ocal inco			20 Locality name	
TX	725-96	5-977	31383.08	2927.63		66105.24	78	63.3	34		Colleen Gateway	
SD	007-03	3-214	31779.15	2348.39		47629.37	93	60.1	.2		Robertson Mews	

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

