F	EISSUED a Employee's social security number				Safe, Accurate,					Visit the	IRS Websi	te	
S	<b>FATEMENT</b>	00	9-10-6163	OMB N	o. 1545-0	0008 FA	AST! Use		*file	at www.i	rs.gov/efile		
<b>b</b> Employer identification number					1	1 Wages, tips, other compensation			2 Federal income tax withheld				
91-7078863						70327.27				23626.91			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Dudley PLC and Sons					71268.74				5452.06				
34305 Rebecca Well Emmachester VT 65289-9764					5 Medicare wages and tips				6 Medicare tax withheld				
					72928.76				2114.93				
					7 Social security tips				8 Allocated tips				
					71268.74				72928.76				
d Control number				9 Advance EIC payment 10 Dependent care benefits					enefits				
9170886									173				
e Employee's first name and initial Last name				11 Nonqualified plans				12a See instructions for box 12					
	Sandra Dean				175				6661				
					13 Statutory Retirement Third-party employee plan sick pay				12b	1			
95210 Rush Spur Apt. 036 Morganport WI 99669-1096					14 Other (see enclosed Notice to Employee)				914				
								yee)	12c				
									307				
								12d					
										893			
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.		19 I	9 Local income tax		20 Locality	name	
OK	018-38	-972	36985.67	3892.78		61747.26 1		10	10984.33		Isaiah	Glen	
MN	358-00	-988	37503.48	3971.3	71459.1		9034.31			Tyler	Isle		

Wage and Tax

5010

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 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							
ST	ATEMENT	0(	09-10-6163	OMB N	OMB No. 1545-0008 to line a tax return, a negligence penalty or other sanction may be imposed on you this income is taxable and you fail to report it.						i you ii	
<b>b</b> Employ	<b>b</b> Employer identification number					1 Wages, tips, other compensation			2 Federal income tax withheld			
91-7078863						70327.27			23626.91			
<b>c</b> Employ	er's name, address, and	3 Social security wages			4 Social security tax withheld							
Dudley PLC and Sons						71268.74	5452.06					
34305 Rebecca Well Emmachester VT 65289-9764					5	Medicare wages and tips	6 Medicare tax withheld					
						72928.76	2114.93					
					7	Social security tips	8 Allocated tips					
					71268.74			72928.76				
<b>d</b> Contro	d Control number					9 Advance EIC payment			10 Dependent care benefits			
!	9170886				173							
e Employ	e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12			
					175			6661				
1	Sandra Dean					itory Retirement Third-party	12b					
95210 Rush Spur Apt. 036 Morganport WI 99669-1096					employee plan sick pay  X  14 Other (see enclosed Notice to Employee)			914				
								12c				
								307				
								12d				
									893			
	ee's address and ZIP co		Transis is in	Law out to the		Tana a sa	1.0			I a a i i iii		
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		· · · · · · · · · · · · · · · · · · ·		19 Local income tax		20 Locality		
OK	018-38	3-972	36985.67	3892.78	61747.26 1		10	10984.33		Isaiah	Glen	
MN	358-00	)-988	37503.48	3971.3	71459.1 9		90	9034.31		Tyler	Isle	

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

