REISSUED a Employee's social security number		Safe, Accurate, Visit the IRS Website				
STATEMENT 225-20-8410	OMB No. 1545-00	008 FAST! Use	at www.	irs.gov/efile.		
b Employer identification number	1 V	Vages, tips, other compensation	2 Federal income ta	x withheld		
16-1762414		153985.82	29157.8	29157.8		
c Employer's name, address, and ZIP code	3 5	Social security wages	4 Social security tax	4 Social security tax withheld		
Alvarado-Farrell LLC		135841.52	10391.88	10391.88		
2580 Christopher Fall Apt. 628	5 N	Medicare wages and tips				
Griffinview OK 66054-8669		178295.25		5170.56		
GIIIIIIVIEW OK 00054 0009	7 8	Social security tips	· ·	8 Allocated tips		
		135841.52		95.25		
d Control number	9 A	dvance EIC payment	· ·	10 Dependent care benefits		
7076721				116		
e Employee's first name and initial Last name		lonqualified plans	12a See instructions	12a See instructions for box 12		
Buckley Beecher		274	P 1484	:		
Arthur Escobar	13 Statu empl		12b			
65002 Collins Stravenue	empi	yee plan sick pay	P 889			
Erikaburgh LA 94448-7133	14 (Other (see enclosed Notice to Employ	ree) 12c			
			D 589			
			12d			
			н 324			
f Employee's address and ZIP code						
15 State Employer's state ID number 16 State wages, tips, etc. 17 State	State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
KS 554-16-827 71157.29 309	92.67	183076.64	16365.49	Mcgrath Rue		
AK 259-88-352 76526.11 273	36.75	139066.35	29592.16	Robert Highway		

Wage and Tax

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.

F	REISSUED	a Employee's soci	al security number		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						
S	TATEMENT	22	25-20-8410	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 Emplo	b Employer identification number			Wages, tips, other compensation			2 Federal income tax withheld				
16-1762414			153985.82			29157.8					
c Emplo	yer's name, address, and	ZIP code			3 Social security wages			4 Social security tax withheld			
Alvarado-Farrell LLC				135841.52			10391.88				
2580 Christopher Fall Apt. 628			5 Medicare wages and tips			6 Medicare tax withheld					
			178295.25			5170.56					
Griffinview OK 66054-8669				7 Social security tips			8 Allocated tips				
						135841.52				1782	95.25
d Control number			9 Advance EIC payment			10 Dependent care benefits					
	7076721									116	
e Employee's first name and initial Last name			11 Nonqualified plans 12a See instructions for box 12			or box 12					
Arthur Escobar			274			P 1484					
			13 Stat			12b					
65002 Collins Stravenue			emp	loyee plan sick pay			P	889			
Erikaburgh LA 94448-7133			14	Other (see enclosed Notice to Employ	ee)	12c					
							D	589			
							ŀ	12d	ע	309	
								124			
									H	324	
	yee's address and ZIP coo										T
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	_	_ocal inc			20 Locality name
KS	554-16	5-827	71157.29	3092.67		183076.64	16	365	.49		Mcgrath Rue
AK	259-88	3-352	76526.11	2736.75		139066.35	29	592	.16		Robert Highway

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

