


|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  |                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|
| <b>REISSUED STATEMENT</b>                                                                                                                      |  | a Employee's social security number<br><b>788-17-9841</b> |  | Safe, Accurate,<br>FAST! Use                          |  | Visit the IRS Website<br>at www.irs.gov/efile.    |  |
| b Employer identification number<br><b>10-3291452</b>                                                                                          |  |                                                           |  | 1 Wages, tips, other compensation<br><b>228839.47</b>                                                                                    |  | 2 Federal income tax withheld<br><b>78836.81</b>  |  |
| c Employer's name, address, and ZIP code<br><b>Leonard, Tran and Holmes Group<br/>4255 Joshua Ramp Suite 835<br/>Kellermouth WA 85983-7306</b> |  |                                                           |  | 3 Social security wages<br><b>234367.9</b>                                                                                               |  | 4 Social security tax withheld<br><b>17929.14</b> |  |
|                                                                                                                                                |  |                                                           |  | 5 Medicare wages and tips<br><b>272320.44</b>                                                                                            |  | 6 Medicare tax withheld<br><b>7897.29</b>         |  |
|                                                                                                                                                |  |                                                           |  | 7 Social security tips<br><b>234367.9</b>                                                                                                |  | 8 Allocated tips<br><b>272320.44</b>              |  |
| d Control number<br><b>6631455</b>                                                                                                             |  |                                                           |  | 9 Advance EIC payment                                                                                                                    |  | 10 Dependent care benefits<br><b>133</b>          |  |
| e Employee's first name and initial Last name<br><br><b>Gerald Johnson<br/>34748 Harvey Union Apt. 111<br/>West James ME 36625-5504</b>        |  |                                                           |  | 11 Nonqualified plans<br><b>202</b>                                                                                                      |  | 12a See instructions for box 12<br><b>H 9473</b>  |  |
|                                                                                                                                                |  |                                                           |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b<br><b>767</b>                                 |  |
|                                                                                                                                                |  |                                                           |  | 14 Other (see enclosed Notice to Employee)                                                                                               |  | 12c<br><b>315</b>                                 |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | 12d<br><b>P 276</b>                               |  |
| f Employee's address and ZIP code                                                                                                              |  |                                                           |  | 15 State Employer's state ID number                                                                                                      |  | 16 State wages, tips, etc.                        |  |
| <b>LA</b>                                                                                                                                      |  | <b>310-42-923</b>                                         |  | <b>111163.01</b>                                                                                                                         |  | <b>9032.38</b>                                    |  |
| <b>NE</b>                                                                                                                                      |  | <b>189-66-019</b>                                         |  | <b>121022.78</b>                                                                                                                         |  | <b>8338.38</b>                                    |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>224224.92</b>                                  |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>30851.46</b>                                   |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>26334.76</b>                                   |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>Nicole Place</b>                               |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>Smith Villages</b>                             |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy B--To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

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Cut here. Keep lower portion for your records.

|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  |                                                                                                                                                                                                                                  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>REISSUED STATEMENT</b>                                                                                                                      |  | a Employee's social security number<br><b>788-17-9841</b> |  | OMB No. 1545-0008                                                                                                                        |  | 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 this income is taxable and you fail to report it. |  |
| b Employer identification number<br><b>10-3291452</b>                                                                                          |  |                                                           |  | 1 Wages, tips, other compensation<br><b>228839.47</b>                                                                                    |  | 2 Federal income tax withheld<br><b>78836.81</b>                                                                                                                                                                                 |  |
| c Employer's name, address, and ZIP code<br><b>Leonard, Tran and Holmes Group<br/>4255 Joshua Ramp Suite 835<br/>Kellermouth WA 85983-7306</b> |  |                                                           |  | 3 Social security wages<br><b>234367.9</b>                                                                                               |  | 4 Social security tax withheld<br><b>17929.14</b>                                                                                                                                                                                |  |
|                                                                                                                                                |  |                                                           |  | 5 Medicare wages and tips<br><b>272320.44</b>                                                                                            |  | 6 Medicare tax withheld<br><b>7897.29</b>                                                                                                                                                                                        |  |
|                                                                                                                                                |  |                                                           |  | 7 Social security tips<br><b>234367.9</b>                                                                                                |  | 8 Allocated tips<br><b>272320.44</b>                                                                                                                                                                                             |  |
| d Control number<br><b>6631455</b>                                                                                                             |  |                                                           |  | 9 Advance EIC payment                                                                                                                    |  | 10 Dependent care benefits<br><b>133</b>                                                                                                                                                                                         |  |
| e Employee's first name and initial Last name<br><br><b>Gerald Johnson<br/>34748 Harvey Union Apt. 111<br/>West James ME 36625-5504</b>        |  |                                                           |  | 11 Nonqualified plans<br><b>202</b>                                                                                                      |  | 12a See instructions for box 12<br><b>H 9473</b>                                                                                                                                                                                 |  |
|                                                                                                                                                |  |                                                           |  | 13 Statutory employee Retirement plan Third-party sick pay<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |  | 12b<br><b>767</b>                                                                                                                                                                                                                |  |
|                                                                                                                                                |  |                                                           |  | 14 Other (see enclosed Notice to Employee)                                                                                               |  | 12c<br><b>315</b>                                                                                                                                                                                                                |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | 12d<br><b>P 276</b>                                                                                                                                                                                                              |  |
| f Employee's address and ZIP code                                                                                                              |  |                                                           |  | 15 State Employer's state ID number                                                                                                      |  | 16 State wages, tips, etc.                                                                                                                                                                                                       |  |
| <b>LA</b>                                                                                                                                      |  | <b>310-42-923</b>                                         |  | <b>111163.01</b>                                                                                                                         |  | <b>9032.38</b>                                                                                                                                                                                                                   |  |
| <b>NE</b>                                                                                                                                      |  | <b>189-66-019</b>                                         |  | <b>121022.78</b>                                                                                                                         |  | <b>8338.38</b>                                                                                                                                                                                                                   |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>224224.92</b>                                                                                                                                                                                                                 |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>30851.46</b>                                                                                                                                                                                                                  |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>26334.76</b>                                                                                                                                                                                                                  |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>Nicole Place</b>                                                                                                                                                                                                              |  |
|                                                                                                                                                |  |                                                           |  |                                                                                                                                          |  | <b>Smith Villages</b>                                                                                                                                                                                                            |  |

**Wage and Tax  
Statement**

**2010**

Department of the Treasury--Internal Revenue Service

Form W-2  
Copy C For EMPLOYEE'S RECORDS.  
(See enclosed Notice to Employee.)

Safe, accurate,  
FAST! Use

