


REISSUED STATEMENT		a Employee's social security number 304-16-0564		Safe, Accurate, FAST! Use 		Visit the IRS Website at www.irs.gov/efile.	
b Employer identification number 98-4650690				1 Wages, tips, other compensation 212779.45		2 Federal income tax withheld 61087.1	
c Employer's name, address, and ZIP code Archer Group LLC 886 Rice Plaza New Brendaside HI 05095-3935				3 Social security wages 248182.89		4 Social security tax withheld 18985.99	
				5 Medicare wages and tips 245145.68		6 Medicare tax withheld 7109.22	
				7 Social security tips 248182.89		8 Allocated tips 245145.68	
d Control number 2100731				9 Advance EIC payment		10 Dependent care benefits 102	
e Employee's first name and initial Last name Michele Garcia 335 Danielle Isle Apt. 468 Kennethview OR 27208-8929				11 Nonqualified plans 199		12a See instructions for box 12 3339	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b 740	
				14 Other (see enclosed Notice to Employee)		12c G 895	
						12d 349	
f Employee's address and ZIP code				15 State HI		Employer's state ID number 604-36-003	
16 State wages, tips, etc. 113089.43		17 State income tax 9949.75		18 Local wages, tips, etc. 212860.76		19 Local income tax 24754.83	
20 Locality name Christina Plains		21 State OK		22 Employer's state ID number 714-85-616		23 State wages, tips, etc. 105759.91	
24 State income tax 7907.63		25 Local wages, tips, etc. 157555.05		26 Local income tax 31765.98		27 Locality name Luis Walk	

**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.

Cut here. Keep lower portion for your records.

REISSUED STATEMENT		a Employee's social security number 304-16-0564		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 98-4650690				1 Wages, tips, other compensation 212779.45		2 Federal income tax withheld 61087.1	
c Employer's name, address, and ZIP code Archer Group LLC 886 Rice Plaza New Brendaside HI 05095-3935				3 Social security wages 248182.89		4 Social security tax withheld 18985.99	
				5 Medicare wages and tips 245145.68		6 Medicare tax withheld 7109.22	
				7 Social security tips 248182.89		8 Allocated tips 245145.68	
d Control number 2100731				9 Advance EIC payment		10 Dependent care benefits 102	
e Employee's first name and initial Last name Michele Garcia 335 Danielle Isle Apt. 468 Kennethview OR 27208-8929				11 Nonqualified plans 199		12a See instructions for box 12 3339	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		12b 740	
				14 Other (see enclosed Notice to Employee)		12c G 895	
						12d 349	
f Employee's address and ZIP code				15 State HI		Employer's state ID number 604-36-003	
16 State wages, tips, etc. 113089.43		17 State income tax 9949.75		18 Local wages, tips, etc. 212860.76		19 Local income tax 24754.83	
20 Locality name Christina Plains		21 State OK		22 Employer's state ID number 714-85-616		23 State wages, tips, etc. 105759.91	
24 State income tax 7907.63		25 Local wages, tips, etc. 157555.05		26 Local income tax 31765.98		27 Locality name Luis Walk	

**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

