F	REISSUED a Employee's social security number						Safe, Acc	urate,		z H		Visit the	IRS Website	
S	TATEMENT	68	37-84-1504	OMB N	lo. 1545-	8000	FAST! U	se	$G^{\prime\prime}$		5	at www.i	rs.gov/efile.	
b Employer identification number						1 Wages, tips, other compensation				Federal income tax withheld				
12-6175863						154637.59				44507.9				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Norton and Sons PLC						112195.52				8582.96				
313 Vazquez Club Apt. 275						5 Medicare wages and tips				6 Medicare tax withheld				
Jamesshire CA 93672-0603						183438.01				5319.7				
Jamessiile on JSU/2 0005						7 Social security tips				8 Allocated tips				
						112195.52				183438.01				
d Control number						9 Advance EIC payment 10 Dep					Depend	endent care benefits		
5330406												219		
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12				
Alexandria Lynn						140				E 9637				
						13 Statutory Retirement Third-party employee plan sick pay				12b		i		
32788 Lopez Green					eiii	x x					Н	281		
Smithfort IL 68551-3990						14 Other (see enclosed Notice to Employee)				12c		1		
											D	344		
										12d				
											G	349		
f Employee's address and ZIP code														
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax		3.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Local income tax			20 Locality name		
NJ	058-68	-653	80671.6	4495.42		139595.94 22		222	2282.37			Raymond Mill		
ТX	766-77	766-77-763 73381.61 4735.71		138667.08 20			204	0412.95			Williams Row			

Wage and Tax

5070

Cut here. Keep lower portion for your records.

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.

REISSUED a Employee's social 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 **STATEMENT** 687-84-1504 OMB No. 1545-0008 this income is taxable and you fail to report it. **b** Employer identification number Wages, tips, other compensation Federal income tax withheld 12-6175863 154637.59 44507.9 c Employer's name, address, and ZIP code Social security wages Social security tax withheld 112195.52 8582.96 Norton and Sons PLC Medicare wages and tips Medicare tax withheld 313 Vazquez Club Apt. 275 183438.01 5319.7 Jamesshire CA 93672-0603 Social security tips Allocated tips 112195.52 183438.01 d Control number Advance EIC payment 10 Dependent care benefits 5330406 219 e Employee's first name and initial See instructions for box 12 Last name Nonqualified plans 12a 9637 140 E Alexandria Lynn 13 Statutory Third-party sick pay 32788 Lopez Green Н 281 X X Other (see enclosed Notice to Employee) 12c Smithfort IL 68551-3990 D 344 12d 349 G f Employee's address and ZIP code 16 State wages, tips, etc. 17 State income tax 20 Locality name 15 State Employer's state ID number 18 Local wages, tips, etc. 19 Local income tax 058-68-653 4495.42 139595.94 22282.37 NJ 80671.6 Raymond Mill 4735.71 766-77-763 138667.08 ТX 73381.61 20412.95 Williams Row

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

