REISSUED	REISSUED a Employee's social security number			Safe, Accurate, Visit the IRS Website								
STATEMENT	7:	33-60-0534	OMB N	o. 1545-0	008 FAS	ST! Use	G	file)	at www.i	irs.gov/efile.		
b Employer identification number				1	1 Wages, tips, other compensation				Federal income tax withheld			
82-32556	98				109382.61				23176.83			
c Employer's name, address	, and ZIP code			3 Social security wages				4 Social security tax withheld				
Garcia Ltd LLC				90393.48				6915.1				
8753 Obrien Brooks				5 Medicare wages and tips				6 Medicare tax withheld				
Catherinechester RI 44581-5314				128324.58				3721.41				
				7 Social security tips				8 Allocated tips				
				90393.48				128324.58				
d Control number				9 Advance EIC payment			1	10 Dependent care benefits				
1116973								126				
e Employee's first name and initial Last name				11 Nonqualified plans			•	12a See instructions for box 12				
Mary Guerrero 07621 Shannon Rapid West Michael ID 82472-8515				175				E 6921				
				13 Statutory Retirement Third-party employee plan sick pay				12b				
									143			
				14 Other (see enclosed Notice to Employee)			yee) '	12c	1			
								D	405			
							_	12d				
									250			
f Employee's address and 2	IP code						-					
15 State Employer's stat		16 State wages, tips, etc.	17 State income tax		18 Local wage	es, tips, etc.	19 Loc	cal income ta	х	20 Locality name		
CA 903	-80-944	60147.08	5431.74		140782.4 1		130	13010.5		Tonya Branch		
SC 141	-10-864	56552.44	4332.18		111096	.86	126	47.11		Cantrell Forks		

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	7:	33-60-0534	OMB N	OMB No. 1545-0008 this income is taxable and you fail to report it.							
b Emplo	yer identification number				1 Wages, tips, other compensation				2 Federal income tax withheld			
82-3255698				109382.61			23176.83					
c Employer's name, address, and ZIP code				3 Social security wages			4 Social security tax withheld					
Garcia Ltd LLC				90393.48			6915.1					
8753 Obrien Brooks				5 Medicare wages and tips 128324.58				6 Medicare tax withheld 3721.41				
				90393.48			128324.58					
d Control number				9 Advance EIC payment			10 Dependent care benefits					
	1116973								126			
e Employee's first name and initial Last name				11 Nonqualified plans			12a See instructions for box 12					
				175			E 6921					
	Mary Guerrero				13 Statutory Retirement Third-party			12b		i		
07621 Shannon Rapid				employee plan sick pay					143			
West Michael ID 82472-8515					14 Other (see enclosed Notice to Employee)			12c		I		
1000 111011dC1 10 02172 0010								D	405			
								12d				
								250				
f Employee's address and ZIP code					Trans.					Loo I III		
15 State	Employer's state ID no		16 State wages, tips, etc.	17 State income tax		10 = 200 10 10 10 10 10 10 10 10 10 10 10 10 1		9 Local income tax			20 Locality name	
CA	903-80)-944	60147.08	5431.74	140782.4 1		13	13010.5			Tonya Branch	
sc	141-10)-864	56552.44	4332.18		111096.86		12647.11			Cantrell Forks	

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

