REI	SSUED	a Employee's socia	ll security number				Safe, Accurate,	re a	- CHI		Visit the	IRS Website	
STAT	TEMENT	87	71-01-9266	OMB N	o. 1545-(8000	FAST! Use	U	7 1111	e	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation				Federal income tax withheld			
99-6761072						145748.98				27165.66			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Campos, Jones and Sharp PLC					149974.94				11473.08				
0686 Katie Viaduct Apt. 837					5 Medicare wages and tips				6 Medicare tax withheld				
Ballshire SC 19605-3577					115953.58				3362.65				
Ballshile SC 19003-3377					7 Social security tips			8 Allocated tips					
					149974.94			115953.58					
d Control nur					9 Advance EIC payment			10 Dependent care benefits					
866076								233					
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
					147			4097					
Me	Melissa Evans					13 Statutory Retirement Third-party employee plan sick pay				ı	1		
14805 Dana Branch Port Brandon OH 47764-3196					14 Other (see enclosed Notice to Employee)				368				
									12c				
								848					
									12d				
										P	176		
f Employee's address and ZIP code													
15 State E	Employer's state ID nu	mber	16 State wages, tips, etc.	17 State income tax		18 Loca	I wages, tips, etc.	19	Local inco	me tax		20 Locality name	
UT	741-49	-010	75328.12	5982.06		185437.64 1		16	.6470.58			Maldonado Port	
DE	252-38	-266	67242.83	4123.97	132318.03		23	23219.07			Morgan Skyway		

Wage and Tax

Form W-2 Statement

5010

Department of the Treasury--Internal Revenue Service

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.

REISSUE	a Employee's soc	cial security number		This information is being furnished to the Internal Revenue Service. If you are required								
STATEME	NT 8	371-01-9266	OMB No	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 Employer identification	n number			1 \	Vages, tips, other compensation	2 Federal income tax withheld						
99-6761072					145748.98			27165.66				
c Employer's name, ad	c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld			
Campos, Jones and Sharp PLC					149974.94			11473.08				
0686 Katie Viaduct Apt. 837 Ballshire SC 19605-3577					Medicare wages and tips	6 Medicare tax withheld 3362.65						
					115953.58							
					Social security tips	8 Allocated tips						
					149974.94			115953.58				
d Control number	d Control number					9 Advance EIC payment			10 Dependent care benefits			
866076								233				
e Employee's first name	and initial Last nar	ne		11 Nonqualified plans			12a See instructions for box 12					
Melissa Evans 14805 Dana Branch Port Brandon OH 47764-3196					147 13 Statutory Retirement Third-party			4097				
					tory Retirement Third-party byee plan sick pay	12b						
					Other (see enclosed Notice to Employ	12c						
1010 224114011 011 17701 0100							848					
								12d				
								P 176				
f Employee's address and ZIP code									1			
	state ID number	16 State wages, tips, etc.	17 State income tax		10 200m magaz, mpa, com		Local income tax		20 Locality name			
UT 7	41-49-010	75328.12	5982.06		185437.64		L6470.58		Maldonado Port			
DE 2	52-38-266	67242.83	4123.97		132318.03	23	219.07		Morgan Skyway			

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

