F	REISSUED a Employee's social security number				Safe, Accurate,				Visit the IRS Website				
S	TATEMENT	12	2-98-0734	OMB N	o. 1545-	0008 I	FAST! Use		1	6	at www.i	rs.gov/efile.	
b Employer identification number					1	1 Wages, tips, other compensation				Federal income tax withheld			
85-4970853						150523.26				30430.16			
c Employer's name, address, and ZIP code					3 Social security wages				4 Social security tax withheld				
Hughes, Bell and Vazquez Inc 01013 Amy Drive					153593.17				11749.88				
					5 Medicare wages and tips				6 Medicare tax withheld				
	Sharonborough IA 01878-4218					168139.43				4876.04			
						7 Social security tips				8 Allocated tips			
					153593.17			168139.43					
d Control number					9 Advance EIC payment			10 Dependent care benefits					
3487585								130					
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12					
	Claire Gibson				112 13 Statutory Retirement Third-party employee plan sick pay				3054				
									12b				
	0959 Steven Stravenue					employee plan sick pay				P			
West Meganfort IN 07307-9233					14 Other (see enclosed Notice to Employee)				12c				
											430		
									12d				
										н	EOE		
										п	505		
15 State	oyee's address and ZIP cod Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	ļ	18 Local v	vages, tips, etc.	19	Local inc	ome tax		20 Locality name	
CA	063-38	-115	81405.51	5267.88		1326	57.32	16	6415	. 08		Jennifer Spring	
				 									
MN	269-86	-974	68239.39	4579.23		1726	59.73	19	385	. 46		Lawson Radial	

Wage and Tax

5070 **Statement**

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	a Employee's socia	•		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 122 30 0734				this income is taxable and you fail to report it.							
	b Employer identification number					Vages, tips, other compensation		Federal income tax withheld				
85-4970853						150523.26			30430.16			
c Employer's name, address, and ZIP code						3 Social security wages			4 Social security tax withheld			
Hughes, Bell and Vazquez Inc 01013 Amy Drive Sharonborough IA 01878-4218						153593.17	11749.88					
					5 N	Medicare wages and tips	6 Medicare tax withheld					
						168139.43	4876.04					
					7 5	ocial security tips	8 Allocated tips					
						153593.17	168139.43					
d Control number					9 Advance EIC payment			10 Dependent care benefits				
	3487585								130			
e Emplo	yee's first name and initial	Last name	9		11 Nonqualified plans			12a See instructions for box 12				
						112	3054					
	Claire Gibson				13 Statutory Retirement Third-party employee plan sick pay			12b				
	0959 Steven Stravenue					X X SILK Pay			P 405			
West Meganfort IN 07307-9233					14 (Other (see enclosed Notice to Employe	12c					
	west Meganioit in 07307-9233							430				
							ŀ	12d				
									505			
f Employee's address and ZIP code												
15 State	Employer's state ID no	umber	16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc. 19 I		_ocal income tax		20 Locality name		
CA	063-38	3-115	81405.51	5267.88		132667.32		.6415.08		Jennifer Spring		
MN	269-86	5-974	68239.39	4579.23	172669.73		19	385.46	Lawson Radial			

Wage and Tax

Statement Copy C For EMPLOYEE'S RECORDS. (See enclosed Notice to Employee.)



Department of the Treasury--Internal Revenue Service

Safe, accurate, FAST! Use

