F	REISSUED	a Employee's socia	I security number			Safe, Ac	curate,			Visit the	IRS Webs	site		
S	TATEMENT	66	57-64-5990	OMB	No. 1545-0	008 FAST! U	se	5~ IL	le	at www.i	rs.gov/efile	Э.		
b Employer identification number					1	1 Wages, tips, other compensation			Federal income tax withheld					
63-0879207						82341.7				21635.4				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Mendez-Walker and Sons						62760.95				4801.21				
0012 Moody Glens Apt. 744 Michaelfort NE 07906-9054					5	l				6 Medicare tax withheld				
						99699.58				2891.29				
					7 Social security tips				8 Allocated tips					
						62760.95				99699.58				
d Control number						9 Advance EIC payment 10 Dependent care benefits								
	4782775	186												
e Employee's first name and initial Last name					11 Nonqualified plans			12a	12a See instructions for box 12					
Michael Hall 054 Patterson Locks Longmouth MO 20539-5304						228			E 3961					
						13 Statutory Retirement Third-party sick pay X 14 Other (see enclosed Notice to Employee)								
										959				
									G	764				
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									_	L				
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	yee's address and ZIP cod		Tan out in the	1.= 0		Tana a sa					Tag. 11.			
15 State	Employer's state ID nu		16 State wages, tips, etc.	17 State income tax	I.	18 Local wages, tips	,	19 Local in		(20 Locality	y name		
TX	339-18	-692	37331.76	3303.94		83591.83		14748	. 85		Reyes	Lakes		
ОН	071-88	-851	43722.76	3711.63		89855.17		12805	. 44		Bryan	Fort		

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 social security number This information is being furnished to the Internal Revenue Service. If you are requi													
S	STATEMENT 667-64-5990 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.										n you if			
b Emplo	b Employer identification number					1 Wages, tips, other compensation				income ta	x withheld			
63-0879207						82341.7				21635.4				
c Employer's name, address, and ZIP code						3 Social security wages				4 Social security tax withheld				
Mendez-Walker and Sons						62760.95				4801.21				
0012 Moody Glens Apt. 744					5 Medicare wages and tips				6 Medicare tax withheld					
					99699.58				2891.29					
Michaelfort NE 07906-9054						7 Social security tips				8 Allocated tips				
						62760.95				99699.58				
d Control number						9 Advance EIC payment				10 Dependent care benefits				
	4782775					186								
e Employee's first name and initial Last name						11 Nonqualified plans				12a See instructions for box 12				
Michael Hall					228				E 3961					
054 Patterson Locks Longmouth MO 20539-5304						13 Statutory Retirement Third-party employee plan sick pay				İ				
						x x			н 959					
						14 Other (see enclosed Notice to Employee)				I				
									G 764					
									12d					
									G	148				
f Emplo	ovee's address and ZIP co	do					ŀ			140				
15 State	Employer's state ID n		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.	19 L	_ocal inc	ome tax		20 Locality	/ name		
ТX	339-18	8-692	37331.76	3303.94		83591.83	14	748	. 85		Reyes	Lakes		
							 				† -			
ОН	071-88	8-851	43722.76	3711.63		89855.17	12	805	. 44		Bryan	Fort		

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

