REISSUED a Employee's social security number				Safe, Accurate, Visit the IRS Website								
	TATEMENT	60)2-28-4493	OMB	No. 1545-00			*file		rs.gov/efile.		
	yer identification number				1 V	1 Wages, tips, other compensation			Federal income tax withheld			
92-9595199						104341.86			20708.24			
c Employer's name, address, and ZIP code					3 S	3 Social security wages			4 Social security tax withheld			
Campbell and Sons and Sons						123095.38			9416.8			
25397 Gates Lodge Suite 902					5 N				6 Medicare tax withheld			
_						97353.63			2823.26			
Port Aaronborough MS 49048-2449					7 S	7 Social security tips			8 Allocated tips			
						123095.38			97353.63			
d Control number					9 A	9 Advance EIC payment			10 Dependent care benefits			
7857443									119			
e Employee's first name and initial Last name					11 N	11 Nonqualified plans			12a See instructions for box 12			
						102			3403			
	Ms. Eri	n				13 Statutory Retirement Third-party employee plan sick pay						
773 Williams Unions					empio	yee plan	sick pay		904			
Burgessville OR 25723-3221					14 C	ther (see enclosed Noti	ce to Employee)) 12c	ı			
Durgessville on 25/25 Sizi							E	772				
								12d				
								639				
f Emplo	yee's address and ZIP code								039			
15 State	Employer's state ID nur		16 State wages, tips, etc.	17 State income ta	x	18 Local wages, tips,	etc. 19	9 Local income tax	:	20 Locality name		
UT	422-28	-508	52819.35	6086.35		102392.72	2	20255.14		Lucas Fords		
NE	651-86	-154	47652.36	4221.86		81691.96		19191.4		Guerra Cape		
Wage and Tax						Department of the TreasuryInternal Revenue Service						
Statement CUL					U		2 opartino	55 110000	.,			

Statement 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	REISSUED a Employee's social security number This information is being furnished to the Internal Revenue Service. If you														
STATEMENT	. 60	02-28-4493	OMB N	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 number					Wages, tips, other compensation			2 Federal income tax withheld							
92-9595199					104341.86			20708.24							
c Employer's name, address, and ZIP code					3 Social security wages			4 Social security tax withheld							
Campbell and Sons and Sons					123095.38			9416.8							
25397 Gates Lodge Suite 902 Port Aaronborough MS 49048-2449					5 Medicare wages and tips			6 Medicare tax withheld							
					97353.63			2823.26							
					7 Social security tips			8 Allocated tips							
					123095.38			97353.63							
d Control number					9 Advance EIC payment			10 Dependent care benefits							
7857443								119							
e Employee's first name and initial Last name					11 Nonqualified plans			12a See instructions for box 12							
Ms. Erin 773 Williams Unions Burgessville OR 25723-3221					102 13 Statutory Retirement Third-party sick pay Day Day Day Day			3403 12b 904							
												E 772			
														12d	
											639				
					f Employee's address and ZIP code 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax					40 Landingers fine ste	140 14	ocal income tax		00 !it	
					, ,		16 State wages, tips, etc.	17 State income tax		18 Local wages, tips, etc.				20 Locality	
UT 42	2-28-508	52819.35	6086.35		102392.72	202	255.14		Lucas	Fords					
NE 65	L-86-154	47652.36	4221.86		81691.96	191	191.4		Guerra	Cape					

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

